

**CITY OF FITCHBURG
COMMUNITY DEVELOPMENT & PLANNING DEPARTMENT
718 MAIN STREET FITCHBURG, MA 01420, SUITE 308
DOWNTOWN BEAUTIFICATION SIGN/AWNING PROGRAM
APPLICATION**

Program Manager: Liz Murphy | 978-829-1897 | lmurphy@fitchburgma.gov

This program has been designed to beautify the downtown area by aiding in the prevention and elimination of slums and blight. This includes removal and replacement of existing defunct signs/awnings and/or design and installation of new signs and awnings for downtown businesses. It is the intent of this program to encourage and promote investment through financial and economic incentives. This program is funded by a grant from the Community Development Block Grant, (CDBG) Program awarded to the City of Fitchburg through the Department of Housing and Urban Development. Please contact the Program Manager for more information or questions about the program or this application.

The program can provide up to \$10,000 for the cost of design, manufacture, and installation of signs and/or awnings. Applicants must provide a 30% match. Match may be in the form of funding directly to this project, or in the form of other, documentable, physical improvements to the property to be made imminently or within the last nine months. Applicants must first be formally approved for the program in writing with a notice to proceed and related instructions on how to proceed. Approved design costs will be reimbursed upon written agreement for the manufacture and installation of the sign/awning.

Applicants must answer all items to the best of your ability. Incomplete applications will not be processed until completed. Any item which does not apply to your project should be marked "N/A."

GRANT REQUEST BY:

- Business Owner for Individual Business Improvements
- Property Owner for Property Improvements

GRANT REQUEST FOR:

- Sign Improvements Awning Improvements
- Both Sign and Awning

I. APPLICANT INFORMATION

Business Name

Business Address

Applicant Name

Email

Applicant's Home Address

Phone

II. BUSINESS DESCRIPTION

Business has operated out of current location for:

- 0 - 3 months - New Business
- 3 months - 1 year
- > 1 year

Type of business (describe): _____
(i.e. Restaurant, Clothing Store, Jewelry Store, Florist, Bakery, etc.)

III. PROPERTY INFORMATION:

Property Street Address

Building Owner/Trust

Contact Person for Owner

Mailing Address

Phone

Term of existing lease agreement (if applicable): Start Date: _____ Termination Date: _____

IV. PROJECT INFORMATION:

Please describe the total scope of the proposed improvements, including sign, awning, facade, interior renovations, capital improvements, new roof, etc.; include improvements through this grant program and any private investment or other public investments to the property

EXTERIOR IMPROVEMENTS

- Sign(s)
- Awning(s)
- Lighting
- Facade
- Roof
- Landscaping
- Accessibility Improvements

INTERIOR IMPROVEMENTS

- Interior Renovations
- Change in Egress
- Accessibility Improvements
- Life Safety Improvements, (sprinkler, alarm, etc.)

Other _____

Please use this space to describe the total scope of proposed improvements, including any improvements completed within the past six months, or future improvements to be completed within a year of this project.

Applicants must provide a 30% match. Match may be in the form of funding directly to this project, or in the form of other, documentable, physical improvements to the property to be made imminently or within the last nine months.

How do you intend to meet the 30% match requirements? _____

Do you have a sign or awning maker preference? Yes No

If yes, identify: _____

Do you have a sign designer preference? Yes No

If yes, identify: _____

In order to ensure the project is completed, sign design costs cannot be paid until the sign installation agreement is completed. How do you propose to pay the costs of design?

Notes: All contractors must be properly licensed and insured in order to participate in the program. Construction labor is subject to prevailing wages, installers must agree to this. Please inquire about this with the Program Manager

If available, please attach a photo of the main facade(s) of the building including potential location of sign/awnings with your application.

V. APPLICANT CERTIFICATIONS

I certify that all information provided in this application is accurate and true to the best of my knowledge and that, if approved, I will complete a sign project in accordance with plans approved by the City of Fitchburg. I will sign a preservation agreement authorizing the City of Fitchburg to encumber funds for my project and stipulating that I will abide by all program requirements. I further understand that a sign/awning preservation agreement will be recorded with and held by the City of Fitchburg and requires me to maintain, but not alter, the completed sign/awning project for five years, as per the terms of the program.

Applicant's Signature

Date