



Storefront Improvement Application

The Wilkinsburg Community Development Corporation (WCDC) is pleased to have funding available through the Borough of Wilkinsburg for commercial property owners with vacant storefronts within Wilkinsburg’s municipal boundaries. Applicants within the Central Business District as outlined in the Wilkinsburg Borough’s Business District Revitalization Plan will be given priority.

Fund requests up to \$10,000 will be considered. An application fee of \$250 is required and will be refunded if your application is not chosen for funding. Checks should be made payable to the Wilkinsburg Community Development Corporation.

Applicants should complete this form and return it to the WCDC office, 1001 Wood Street. Electronic submissions can be sent to: Gordon@wilkinsburgcdc.org

APPLICANT INFORMATION

Name of Applicant: _____ Application Date: _____

Telephone: Work: _____ Home: _____ Cell: _____ Fax: _____

Applicant Mailing Address: _____

Address of Building: _____

Name and Type of Business: _____

Federal Tax ID or Social Security Number: _____

PROPERTY OWNER INFORMATION (if different from Applicant)

Name of Owner: _____ Telephone: _____

Owner Mailing Address: _____

Describe the scope and purpose of the work to be done: _____

Preliminary Cost Estimate: \$ _____ WCDC Grant Request: \$ _____

NOTE: DO NOT START ANY IMPROVEMENTS UNTIL YOU HAVE BEEN NOTIFIED THAT YOUR GRANT HAS BEEN APPROVED BY THE WILKINSBURG COMMUNITY DEVELOPMENT CORPORATION.

Statement of Understanding:

- A. I agree to comply with the guidelines and procedures of the WCDC Storefront Improvement Program.
- B. I understand that I must submit detailed cost documentation, copies of bids, contracts, invoices, receipts and contractor's final waiver of lien upon completion of the approved improvements.
- C. I understand that work done before approval of the grant by the WCDC is not eligible for reimbursement.
- D. I understand the Storefront Improvement grant is subject to taxation and that the WCDC is required to report the amount and recipient of said grants to the Internal Revenue Service.
- E. I understand that my property taxes must be current in order to be considered for funding.
- F. I understand that the total amount of the grant awarded must be repaid to the Borough of Wilkinsburg in the event that the property owner transfers title of the property within 24 months from the date that the grant payment was made. At the time of the grant payment, a lien will be filed against the property. If there is no property transfer within 24 months from the date that the grant payment was made, the lien as set forth herein will be satisfied.

I hereby affirm that I have full legal capacity to authorize the filing of this application and that all information and exhibit herewith submitted are true and correct to the best of my knowledge. The owner invites the WCDC to make all reasonable inspections, investigations and take pictures of the subject property during the process period associated with this application. I authorize the use of any pictures taken by the WCDC.

I also understand that in order for my request for funds to be approved, I must agree to work with and follow the recommendations of the WCDC Design Committee and before starting any work following approval of this application, I must complete and sign a Storefront Improvement Grant Program Agreement.

Signature of Applicant

Date

Signature of Applicant

Date

The following items must be attached to this application in order for it to be considered complete:

- \$250 Application Fee (refundable if your application is not approved)
- Drawings of proposed improvements
- Cost estimates or bids - consideration should be given to vendors currently doing business in Wilkinsburg. This must include any estimates for architectural or design services, if applicable.
- If applicant is a tenant, a letter from the Property Owner authorizing improvements.
- Projected timeline for completion not to exceed 6 months

Complete Application packets may be submitted to:

**Wilkinsburg Community Development Corporation
Attn: Storefront Improvement Program
1001 Wood St.
Wilkinsburg, PA 15221**



Business Profile

Business Start Date (month and year): _____

Number of Employees, including self: _____

Estimated Sales Year to Date: _____

Describe your business in one to two sentences: _____

Goals for current year: _____

Challenges and Obstacles: _____

Opportunities: _____

Have you attended a business planning workshop? YES / NO (*circle one*)

If **YES**, **When** was it and **Who** held the workshop? _____

If **NO**, Are you interested in attending one? YES / NO (*circle one*)



Property Owner Authorization Form

This form is to be completed by the property owner if the applicant does not own the property. A copy of the property's current lease must be submitted with this form.

I, [name of property owner] _____, hereby authorize [name of applicant] _____ to carry out improvements as specified in the attached Façade Renovation Program Application. The façade renovation project will be carried out on my property, which is located at [address of property] _____.

- I certify I have reviewed a copy of the application and am fully aware of what is being proposed.
- I certify I am the legal owner of record and I have the legal right to give this authorization to the grant applicant.
- I agree to hold harmless and indemnify the Wilkinsburg Community Development Corporation, its staff, and the Borough of Wilkinsburg in the event of property damage or physical injury as a result of working on the aforementioned project.

Property owner signature _____ Date _____

Property owner name (print) _____