



VILLAGE OF LAKEVIEW
DOWNTOWN DEVELOPMENT
AUTHORITY

MONTCALM COUNTY

OFFICE 989.352.6322

FAX 989.352.6378

Village of Lakeview Downtown Development Authority

Facade Reinvestment Grant Application

Building Owner's Name (Applicant): _____

Project Address: _____ Mailing Address: _____

Telephone Number: _____ Email: _____

Existing Use of Building: _____

Proposed Project Start Date: _____

Will the project result in a new use? If so, please explain.

Type of Work: (Check all that apply) Sign Only ☐ Awning Only ☐ Façade Renovation ☐

Project Description: (Please be specific)

**Please include information on any product manufacturer, color (awning fabric swatches and/or paint samples), etc., and a drawing of the proposed improvements. Attach additional sheets if necessary.*

How will this project benefit Lakeview?

Estimated Project Costs (by project element):

Project Element	Estimated Cost
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_____	_____
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_____	_____
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_____	_____
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_____	_____
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**Attach copies from licensed contractors for each element.*

Total Project Estimated Cost: _____

Requested Grant Amount: _____

Have you received a DDA Façade Grant in the last five years on this property? Yes/No

Application materials checklist to be submitted:

1. Application form completed and signed by the property owner.
2. Sketch of the proposed façade or exterior improvements.
3. Any proposed paint, awning, etc. samples.
4. Pictures of the existing façade and proposed improvements.
5. Itemized cost estimates per project element. Each element must be listed separately with an estimated cost. (E.g. 12 windows \$500.00, tuck pointing \$600.00). these must be provided by licensed contractors.
6. Narrative explaining the project.

The undersigned applicant affirms that:

- A. The information submitted is true and accurate to the best of my (our) knowledge.
- B. I (we) have read and understand the conditions of the Façade Program and agree to abide by its conditions and guidelines.
- C. The decision of the Downtown Development Authority/Village Manager is final.

Signature of the Applicant: _____ Date: _____

Please return all application materials to the Village Manager's office located at 208 S. Lincoln Avenue, Lakeview, MI.