COMMUNITY BEAUTIFICATION GRANT PROGRAM

COMMERCIAL APPLICATION
Pineville Community Beautification Grant Program Checklist

- Application
- A complete budget showing total cost of project
- Three competitive quotes
- Photos of existing conditions
- Rendering or detail and location of products being bought for the project
- A clear site plan showing the location of all improvements
- If you are a renter, provide written approval of project from the property owner
- Other documentation specifically requested by staff

_The Town of Pineville reserves the right to request supplemental information as deemed necessary from the applicant on a case-by-case basis to accurately evaluate eligibility._

NOTE: This is a dollar-for-dollar matching grant. The applicant must prove that the amount applied for has been matched. This may be done by providing final receipts and invoices. If the final amount spent is less than the total amount requested, the grant will be calculated based on this lower amount paid. You may not receive a larger grant than what is requested on the grant application.

_You must complete the application form in its entirety and provide copies of the above listed documents. Incomplete applications and/or failure to provide required documentation may result in a rejection of your application._
Application

1. Applicant Contact Name: ____________________________________________________

2. Mailing Address:

   __________________________________________________
   __________________________________________________

3. Project Location (if different than mailing address):

   __________________________________________________
   __________________________________________________

4. Phone Number: _______________________ Email: ________________________________

5. Alt. Number: _________________________

6. Do you □ RENT or □ OWN this property?

7. Approximate Age of Home: _________ years

8. Description of Project:

   __________________________________________________
   __________________________________________________
   __________________________________________________
   __________________________________________________
   __________________________________________________
   __________________________________________________
   __________________________________________________
9. Discuss the demonstrated financial need for the project:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

10. What is the plan for the future maintenance of the project?

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

*This is a dollar-for-dollar matching grant up to $5000. The applicant must prove that the amount applied for has been matched. This may be done by providing final receipts and invoices. If the final amount spent is less than the total amount requested, the grant will be calculated based on this lower amount paid.

11. Grant amount you are applying for: $________________

12. Project start date: __________________

13. Project completion date: ________________
14. Please provide the additional items in addition to this application:
   a. Photos of existing conditions
   b. Map of project area
   c. Site plan showing the location of all improvements
   d. Other documentation as requested by staff

Application Agreement

I (we), the applicant of the above described project understand that the intent of this application is only for purposes of pre-qualifying and does not guarantee acceptance or approval and no commitment is hereby made, in whole or in part, on behalf of the applicant, Town Staff, Town Council, or the Planning Board. Other forms, building permits, legal requirements, and tax are the responsibility of the applicant.

☐ I understand and agree to these terms

Certification by the Applicant

The applicant certifies that all information in this application, and all information furnished in support of this application, is true and complete to the best of the applicant’s knowledge and belief. Providing false information shall disqualify the applicant from the approval process for the 2017-2018 fiscal year.

Verification of any information contained in this application may be obtained by Town Staff from any available source.

______________________________  _______________________
Applicant Signature            Date

Please return this original application with any required supporting documentation to the following:

Town of Pineville
ATTN: Travis Morgan
PO Box 249
Pineville, NC 28134