



**APPLICATION FORM
CORNWALL FAÇADE IMPROVEMENT PROGRAM III**

INSTRUCTIONS: Complete all items carefully. Construction work started before project approval by the Cornwall Façade Improvement Program Committee (CFIP) is not eligible for reimbursement. Return complete application with all required documentation by email to cwselectmen@optonline.net , or by regular mail to:

**Cornwall
Façade
Improvement
Program**

Cornwall Façade Improvement Program
First Selectman's Office
24 Pine Street, P.O. Box 97
Cornwall, CT 06796

If you have any questions regarding this application, please call the First Selectman's Office at 672-4959.

The Cornwall Façade Improvement Program is funded through a grant provided by the Connecticut Department of Economic and Community Development

1. APPLICANT INFORMATION - Specify the contact person and address to which the CFIP correspondence should be sent:

Name: _____

Mailing Address: _____

Primary contact person: _____

Telephone: _____ Email _____

Are you a: _____ Landlord _____ Owner/Occupant _____ Tenant

Is applicant: _____ Corporation _____ Sole Proprietor Business

_____ Partnership _____ Non-Profit Organization

2. PROPERTY INFORMATION

Address of subject property: _____

Property identification # (from Assessor's Map): _____

Date building was constructed: _____

Building dimensions: Height _____ Width _____ Depth _____

Number of floors: _____ Total square footage: _____

Business and residential tenants, uses and size/square footage (Attach additional sheet if needed):

Tenant name Type of Business Size/square footage

- ____ 4. Awning design and specifications, if applicable, including a fabric/color sample.
Two copies needed.
- ____ 5. Painting plan, if applicable, and paint color samples. Two copies needed
- ____ 6. Cost estimates from two different general contractors or, if you plan to serve as your own general contractor, cost estimates from two different subcontractors and suppliers for each component of the proposed renovation. Include two copies of all cost estimates.
- ____ 7. Two copies of current photographs showing the front, side and rear facades of the building.
- ____ 8. Copy of Assessor's Property Card
- ____ 9. Brief description of the business activity conducted in the building.

The undersigned applicant(s) affirms that:

- A. All information submitted in this application, and all documentation furnished in its support, is true and accurate to the best of my/our knowledge.
- B. I (we) agree to secure all applicable local and state permits and approvals prior to commencing this renovation project.
- C. I (we) have read and understand the Program Description for the Cornwall Façade Improvement Program. I (we) agree to abide by all program conditions and rules.
- D. I (we) agree to abide by all applicable federal, state and local laws and regulations including Equal Employment Opportunity and non-discrimination regulations.
- E. To the best of my (our) knowledge, the building proposed for improvement is not in violation of any zoning or building codes and the property taxes are fully paid.
- F. The property proposed for renovation has not received any other State funding during the past three years.

Signature of Applicant(s)

_____ Date: _____
 _____ Date: _____

Signature of Building Owner (if different from Applicant)

_____ Date: _____