

## DRI SMALL PROJECT FUND APPLICATION

**PROJECT APPLICATION – PLEASE TYPE.** Incomplete applications OR applications that have incomplete responses will NOT be accepted.

## APPLICANT INFORMATION

**Applicant's Name:** \_\_\_\_\_

**Please circle if you are a: *Business Owner* or *Building Owner***

If you are a business owner, what is the name of your business: \_\_\_\_\_

*\*Please note – if you are a business owner, you must include a signed letter from the property owner giving permission to do the project with this application.*

**Applicant's Address:** \_\_\_\_\_  
*Street Address City State Zip*

**Applicant's Phone:** (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ **Email:** \_\_\_\_\_

## PROPERTY INFORMATION

**Property Owner:** \_\_\_\_\_

**Property Address:** \_\_\_\_\_

**Owner's Phone:** (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ **Email:** \_\_\_\_\_

## TENANT INFORMATION

*List all current tenants and their date of lease expirations.*

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**TENANT INFORMATION** *(If different from above.)*

**Contact's Name:**

**Contact's Address:** \_\_\_\_\_

*Street Address                      City                      State                      Zip*

**Contact's Phone:** (\_\_\_\_) - \_\_\_\_ - \_\_\_\_ **Email:** \_\_\_\_\_

## PROJECT DESCRIPTION

*Please check which type of project(s) you are proposing:*

- ☐ **Façade Improvement** *(Preservation projects, masonry work, painting, awnings, signage, etc.)*
- ☐ **Interior Improvement** *(Plaster, paint, HVAC, plumbing, electric, flooring, etc.)*
- ☐ **Structural Improvements** *(Roof repair, correct code violations, foundation, etc.)*
- ☐ **Residential Units** *(convert vacant upper stories into apartments, correct code violations)*
- ☐ **Other**

**PROJECT APPLICATION (continued)**

## PROJECT DESCRIPTION (Continued from page 1)

**Project Description:** Please describe proposed work in detail. Use additional sheets if necessary.

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**Estimated Total Project Cost:** \_\_\_\_\_

**Amount of Grant Funding Requested:** \_\_\_\_\_

*Grant requests must be between \$10,000 and \$100,000, with a dollar-for-dollar match requirement.*

**If your project is selected for funding, do you agree to the 50/50 match requirement?**

                     **Yes**                                           **No**

Example: \$50,000 owner investment is required for a \$50,000 grant.

**Has an official bid from a reputable contractor been obtained to verify project costs?**

**Yes** **No**

**If yes, please provide the name of the contractor.** \_\_\_\_\_

**If yes, please provide the date that the bid was obtained.** \_\_\_\_\_

**If no, how was project cost determined?** \_\_\_\_\_

*Please note – For approved projects, per state grant requirements, the Greater Lockport Development Corporation will conduct all contractor bidding, contractor reviews and selection, and have final approval on design and scope of work for all projects.*

## PROJECT APPLICATION (*continued*)

## IMPACT

Please explain in detail the positive effect your project will have on the community **AND** how it meets one or more of the following goals of the DRI Small Project Fund. Goals include: Projects that create upper story residential units; have historic value or historic properties in danger of being lost in part or in total due to disrepair or damage; projects that will reduce blight and contribute to the economic recovery of the target area; create jobs; allow businesses to expand service offerings; enhance tourism efforts/draw visitors to the target area; leverage other funds/investment beyond the required 50% match; project readiness/viability. (Use additional sheets if necessary).

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**APPLICATIONS MUST BE SUBMITTED BY: 4 PM on APRIL 30, 2020**  
**SUBMIT COMPLETED APPLICATIONS TO:**

BRIAN SMITH  
GREATER LOCKPORT DEVELOPMENT CORPORATION  
ONE LOCKS PLAZA  
LOCKPORT, NY 14094

*Phone: 716-439-6688*

*Email: bsmith@lockportny.gov*