

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 ***Property Owner***

Business owners, list 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: _____

Applicant's Phone: (_____) - _____ - _____

Email: _____

PROPERTY INFORMATION *(If different than above)*

Property Owner Name: _____

Property Address: _____

Owner's Phone: (_____) - _____ - _____

Email: _____

PROJECT DESCRIPTION

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

- ☐ **Façade Improvement** *(Preservation projects, masonry work, painting, awnings, signage that is building mounted, etc.)*
- ☐ **Interior Improvement** *(Plaster, paint, HVAC, plumbing, electric, flooring, etc.)*
- ☐ **Structural Improvements** *(Roof repair, correct code violations, foundation issues, etc.)*
- ☐ **Residential Units** *(converting vacant upper stories into apartments)*
- ☐ **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 \$40,000, 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: \$10,000 owner investment is required for a \$10,000 grant for a \$20,000 total project cost.

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

Yes _____ **No** *If yes, please include any bids obtained with this application.*

If yes, please provide the name of the contractor(s). _____

If yes, please include any bids/proposals obtained with this application to help verify costs.

If yes, please provide the date(s) that the bid was obtained. _____

If yes, please include any bids/proposals obtained with this application to help verify costs.

If no, how was project cost determined? _____

*Please note – For all approved projects, per NY state grant requirements, the Greater Lockport Development Corporation must conduct all contractor bidding, contractor reviews, and have will final approval on contractor selection, and design and scope of work for all projects. Qualified Minority and/or Women-owned businesses will be given first consideration. Property or business owners are **NOT** allowed to do work on their own 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).

[illegible]

**APPLICATIONS WILL BE ACCEPTED UNTIL ALL FUNDS ARE EXHAUSTED.
SUBMIT COMPLETED APPLICATIONS TO:**

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

Phone: 716-439-6688

Email: bsmith@lockportny.gov