BEL AIR FAÇADE IMPROVEMENT PROGRAM

PROJECT APPLICATION

PROJI	ECT ADDRESS:
Doing	Business As:
APPL	ICANT NAME:
Addre	SS:
Daytir	ne Phone Number:
Façad	e Improvement Funds Requested*
Total l	Project Cost:
*Maxi	mum request must be no greater than \$10,000 and no less than \$1,000.
	iption of Project:
	rty Ownership:
	Do you own or lease the property on which the façade improvements will be made? Own Lease Have a purchase agreement?
2.	If you lease, what is the expiration date of the lease?
3.	Name, address and telephone number of the owner of record for leasehold properties
	Application Checklist:

renovation project as proposed in	
	<u>Applicant</u>
	Name
Date	Signature
	Building Owner (if other than applicant)
	Name
Date	Signature