



FAÇADE IMPROVEMENT GRANT PROGRAM APPLICATION
THE ARDMORE INITIATIVE BUSINESS DISTRICT AUTHORITY

Applicant Name: _____

Business Name: _____

Business Address: _____

Phone: _____ Email: _____

Address of façade improvement project (if different than above):

Please indicate the improvements included in your project proposal:

- Windows Doors Painting Masonry work Lighting Signage
 Awnings Other: _____

The grant award is equal to 50% of your project costs, up to \$5,000. Expected Grant Amount: \$ _____

Please provide a brief narrative detailing the scope of the project:

Do you plan to make additional improvements not included in the current project? If yes, please describe:

Applicant's acknowledgement of agreement to the terms and conditions off the Façade Improvement Grant Program as specified in the attached guidelines

Signature of Applicant

Date

Signature of Property Owner

Date

Return to: The Ardmore Initiative, 56 E Lancaster Ave, Ardmore, PA 19003
Fax: 610-645-0662, Marie@ardmoreinitiative.org