

TOWN OF FRAMINGHAM
SIGN & FAÇADE IMPROVEMENT PROGRAM APPLICATION

Program Description:

Façade Improvements: A rebate in funds of up to 1/3 of approved total costs of the improvements with a maximum rebate of \$10,000.

Sign Improvements: A rebate in funds of up to 2/3 of the approved total cost of the improvements, up to a max of \$3,000.

Please return your completed application with all supporting documents to:

Department of Community & Economic Development

Town of Framingham

150 Concord Street, Room B-3

Framingham, MA 01702

(508) 532-5457

(508) 532-5461 FAX

This application is for assistance to:

Name of Business

Business Address Phone Number

PLEASE NOTE:

- There may be no liens against the Applicant's property. ALL payments to the Town must be current (taxes, water, etc.).
- Projects must conform to applicable building codes, zoning regulations, and/or requirements for public accessibility. Other conditions may apply.
- Submission of an application does not guarantee assistance will be offered.
- The Town of Framingham cannot provide reimbursement for costs incurred prior to the formal execution of program agreements and contracts.
- The Town of Framingham reserves the right to reject or accept all or part of any application and to establish a priority system or waiting list for projects.

Please call 508.532-5457 if you have any questions or need assistance in completing the form.

TOWN OF FRAMINGHAM
SIGN & FAÇADE IMPROVEMENT PROGRAM APPLICATION

Funded through the federal Community Development Block Grant Program administered by the Community and Economic Development Department.

Instructions: Applicants must answer all items; incomplete applications will be returned. Any item which does not apply to your project should be marked "N/A".

SECTION A. BUILDING OWNERSHIP INFORMATION (Only if different from applicant)

1. Property Owner's Name: _____

2. Property Owner's Address: _____

3. Property Owner's Phone Number: _____

4. What are your plans to finance costs of construction?

Program Rebate: \$ _____ Cash: \$ _____ Private Financing: \$ _____

5. Institution/Bank Name: _____

Address: _____

Telephone #: _____

*Property Owner's Signature: _____ Date: _____

*Property Owner's Signature Herein Provides Consent For Proposed Improvements

SECTION B. BUILDING USE INFORMATION

1. Number of businesses occupying the building: _____

2. Number of vacant commercial units in the building: _____

3. How long have these units been vacant: _____

4. Number of residential units: _____ When were the residential units created (year)? _____

5. Assessed value of the property: _____

6. Town of Framingham Assessors: Sheet # _____ Block _____ Lot/s _____

7. So. Middlesex Registry of Deeds: Book _____ Page _____

8. Is the property registered at the Land Court: No ___ Yes ___ Certificate #: _____

9. Are there any outstanding debts (mortgages, encumbrances, liens, attachments) on the property?

Yes ___ No ___

If "Yes", please indicate all secured interests in this property.

If necessary, attach a separate page to document additional items.

TOWN OF FRAMINGHAM
SIGN & FAÇADE IMPROVEMENT PROGRAM APPLICATION

First Mortgage Holder name: _____

Address: _____

Amount of Lien: _____

Date of Lien: _____

Second Mortgage Holder name: _____

Address: _____

Amount of Lien: _____

Date of Lien: _____

SECTION C. PROJECT INFORMATION

Please describe the type of improvements you propose to make to the building facade. Include a brief description of all other improvements (use additional sheets, if necessary).

1. Approximately how much are you able to spend? \$ _____

2. Have you sought architectural assistance? Yes ___ No ___

If yes, please attach drawings, renderings and plans.

Firm or individual's Name and Telephone # _____

Professional Credentials _____

3. Have you sought estimates from general contractors? Yes ___ No ___

If yes, please list the names of all contractors who provided an estimate and attach copies of all estimates.

TOWN OF FRAMINGHAM
SIGN & FAÇADE IMPROVEMENT PROGRAM APPLICATION

Firm or individual's Name Telephone #

Firm or individual's Name Telephone #

Firm or individual's Name Telephone #

4. What is the estimated time of project completion? _____

APPLICATION CHECKLIST

Please be sure to include the following required items with your application:

- ___ Completed application form
- ___ Photographs (color) of existing conditions (2 sets)
- ___ Conceptual idea of improvements or architectural services rendered
- ___ Three bids from potential contractors.

Your application is not complete until ALL documents are received. In certain cases, further documentation may be required. You will be notified in that case.

Please check one and provide the necessary documents:

BUILDING OWNER

- Property Deed
- Paid Municipal Tax Bill

TENANT

- Business Lease
- Owner's Permission for Property Improvements

TOWN OF FRAMINGHAM
SIGN & FAÇADE IMPROVEMENT PROGRAM APPLICATION

**Owner's will need to provide an Insurance Certificate by the closing date!*

APPLICANT CERTIFICATION

I/we certify that all information provided in the application is accurate and that I/we will complete a facade improvement project in accordance with plans approved by the Town of Framingham's Department of Community and Economic Development. Upon notification that my/our project is approved by the Façade and Sign Improvement Program, I/we will sign a participation agreement authorizing the Town to encumber funds for my/our project, and stipulating that I/we will abide by all program requirements. I further agree that at the conclusion of the façade improvements to maintain but not alter the completed project for ten (10) years from the date of the covenant.

Applicant(s) Signature(s):

Signature _____ Date _____

Signature _____ Date _____

FOR OFFICE USE ONLY

Application No: Accepted by: _____ Date Received: _____

Date Approved: _____ Three Bids Received on (date): _____

Winning Bid _____ ZBA variance needed? _____

Hearing Date: _____

Building permit issued on: _____