



Niles MAIN STREET

NILES DDA MAIN STREET BUILDING IMPROVEMENT PROGRAM

LOW INTEREST LOAN AND FAÇADE GRANT INFORMATION

APPLICATION CHECK-LIST

I am applying for (*check all that apply*)

- Matching Façade Grant
- Niles DDA Main Street Low Interest Loan Program

For this project, I also intend to apply for (*check all that apply*)

- City of Niles Revolving Loan Funds
- Federal Historic Tax Credits through Michigan State Historic Preservation Office (MiSHPO)
- Michigan Economic Development Corporation (MEDC) Community Revitalization Program (CRP) Funding

I have (*if applicable*):

- Building Owner Permission for work planned.
- Building Permits Obtained (date) Permit # _____
- Zoning Compliance Permits (including Sign Permit)
- Certificate of Appropriateness (COA) obtained from Niles Local Historic District Commission
- Copy of Assessor Card
- Copy of Beacon Map
- Contacted MiSHPO office for Federal Historic Tax Credit information
- Made Application to Niles DDA Main Street for Design Assistance
- Application made to Niles DDA Main Street for Loan
- Application made to Niles DDA Main Street for Façade Grant
- Proof of my matching funds.

All properties in the City of Niles Downtown Development Authority Main Street District (a.k.a. Niles DDA Main Street) are eligible to apply for the following programs:

- 1) **Low Interest Building Improvement Loan:** \$5,000 maximum for 36mo maximum term. Borrower needs to show proof of 25% matching funds.
- 2) **Façade Grant:** 50/50 Matching Grant for **pre-approved** Façade work up to \$5000 Maximum Grant. Grant may be used once every two years.

Building Improvement Revolving Loan Fund Guidelines:

- Maximum loan amount \$5,000.00 Require a 25% cash match from borrower.
- Maximum 3 year/36 month term ~ no penalty for early payoff
- Interest rate fixed at no more than 1% over prime for the life of the loan.
- Non-property owners must have a lease equal to the term of the loan.
- Loan to be secured by property lien or personal guarantee.
- Funds may be used for building infrastructure and/or façade improvements.

The following physical improvements qualify:

HVAC Plumbing Electrical Roof Windows Façade Improvements

- Proof of Permits and Local Historic District Commission approval, if applicable

Façade Grant Guidelines:

- All historic and building codes must be followed and inspected/approved prior to reimbursement. Emphasis on good design.
- Cost of Windows, Brick/Siding/Paint/Tuck Pointing/ Design Assistance/ Exterior Doors / Historic Features/Gutters and Downtown Spouts are allowed.
- Cost of awnings/ signage is not eligible, however costs associated with awning removal is eligible.
- Property must not have delinquent property taxes, outstanding liens or fines.
- Tenants must have written permission from property owner.
- Proof of Permits and Local Historic District Commission approval, if applicable

APPLICATION

Applicant Name: _____

Applicant Mailing Address: _____

Home Phone: _____ Daytime Phone: _____

Mobile Phone: _____ Fax: _____

E-mail Address: _____

Do you own or lease the property? ___ Own ___ Lease

Property Owner Name: *(if different from Applicant)* _____

Owner Mailing Address: _____

Property Owner Home Phone: _____ Property Owner Daytime Phone: _____

Property Owner Mobile Phone: _____ Property Owner Fax: _____

E-mail Address: _____

Primary contact for Project: _____

Architect: _____

PROPERTY INFORMATION

Date of Construction: _____ Number of Stories: _____

Is this building located on a corner? ___ Yes ___ No

Is your building located in the Downtown Niles Local Historic District? ___ Yes ___ No ___ Unsure

Is this property listed on the National Register of Historic Places *(either individually or as a contributing building in a National Register District)*? ___ Yes ___ No ___ Unsure

If YES, do you have your Certificate of Appropriateness (COA) from the Local Historic Commission? ___ Yes ___ No

Is the first floor of the building currently occupied? ___ Yes ___ No

If Yes, Name of Business: _____

Type: ___ Retail ___ Service ___ Professional ___ Other: _____

Are any Upper stories occupied? ___ Yes ___ No

Business/ Tenant #1 name & address

Daytime Phone _____ Evening Phone _____

Business / Tenant #2 name & address

Daytime Phone _____ Evening Phone _____

Business/Tenant #3 name & address

Daytime Phone _____ Evening Phone _____

Address of Property to be improved: _____

Summarize or attach Approved Scope of Work:

Work started by:

Date project to be completed by:

All work must be APPROVED to be eligible for reimbursement grant.

Any unapproved changes to project plans as stated above in the Scope of Work will void the grant and result in nonpayment of funds.

If changes to the Scope of Work are necessary, it is the responsibility of the Grant Recipient to immediately contact the City of Niles Downtown Development Authority for additional project review and approval by the Niles DDA Main Street Design Committee or the City of Niles Local Historic District Commission, which ever has authority over the address, before continuing with the project.

Funding awards cannot be increased after notification of the initial award, regardless of approved change in Scope of Work.

Work completed prior to grant approval is not eligible for funding.

Reimbursement will occur after project completion and upon submission of appropriate documents.

All required permits are the responsibility of the owner/applicant.

I understand that the Facade Improvement Grant must be used for the project described in this application and that the Niles DDA Main Street Grant Review Committee must review the application and approve it prior to beginning construction. I understand that failure to comply with the approved application may result in losing my eligibility to receive funds.

I acknowledge that the Niles DDA Main Street program is obligated only to administer the grant procedures and is not liable to the applicant, owner or third parties for any obligations or claims of any nature growing out of, arising out of or otherwise related to the project or application undertaken by the applicant and/or owner.

Signature of Applicant(s):

Date:

As the legal owner of the above property, I hereby grant authorization to complete the facade improvements indicated on this application.

Signature of Property Owner(s):

Date:

FAÇADE GRANT PROGRAM REQUEST FOR REIMBURSEMENT FORM

1. APPLICANT NAME: _____

2. APPLICANT MAILING ADDRESS: _____

3. APPLICANT TELEPHONE NUMBER: _____

EMAIL: _____ FAX#: _____

Column 1 Vendor and/or Description of Material <i>Include receipt for each item listed below</i>	Column 2 ACTUAL AMOUNT From receipt or paid invoice	Column 3 REQUEST AMOUNT Multiply Column 2 times .75	
<i>Sample: Purchase of lumber and supplies at Lowe's on 6-6-2006</i>	\$538.00	\$403.50	
			Line 1
			Line 2
			Line 3
			Line 4
			Line 5
			Line 6
			Line 7
			Line 8
			Line 9
			Line 10
			Line 11
			Line 12
Total of Columns			Line 10
Maximum Amount from Award Letter			Line 11
Enter the lesser of Line 12 and Line 13			Line 12

Required Attachments

- Copy of receipt or paid invoice for all items for which reimbursement is requested
- Picture of completed work
- Copy of any deadline extensions or project revisions from the Design Committee
- Copy of all work permits issued for project work
- Copy of certificate(s) from building inspector issued for project work
- Copy of all contractor's license and certificate of insurance as appropriate
- Proof of payment for all applicable property taxes

I, _____, request reimbursement in the amount of \$ _____.(line 14)

(Signature)

(Date)



Niles MAIN STREET

This covenant made this _____ day of _____, 20_____, by and between _____ 'Property Owner' and The City of Niles Downtown Development Authority Main Street Program (a.k.a. Niles DDA Main Street), Niles, Michigan. Whereas, Niles DDA Main Street has made available funds for façade grants and Whereas, the Property Owner receiving grant funds will, after completion of the project, assume total cost of the continued maintenance, repair and administration of the property in a manner satisfactory to the City of Niles.

Whereas, a grant in the amount of \$ _____ has been awarded to _____ for property located at _____

Now therefore, the Property Owner agrees to the following provisions:

- For a period of two years after the grantee receives grant funds there shall run with the land, a covenant, in favor and enforceable by the City of Niles, requiring the owner and any successors in interest to repair, maintain and administer the features, materials, appearance, workmanship, and environment of the premises in the state of repair and condition as at the time of completion of the grant-assisted work. Nothing in this agreement shall prohibit the owner from seeking financial assistance from any source available to them.

In the event of a violation of any covenant or restriction herein, the City of Niles shall have available all legal and equitable remedies to enforce the owner's obligations hereunder.

Name of Property Owner:	Date:
Signature of Property Owner:	Date:
Name of Property Owner:	Date:
Signature of Property Owner:	Date:
Niles DDA Main Street representative:	Date:

SUBMISSION CHECKLIST

LOAN

- A. _____ Application made to Niles DDA Main Street for Loan
- B. _____ Written Project Approval from Building Official
 - a. _____ Building Permits Obtained (date) Permit # _____
 - b. _____ Zoning Compliance Permits (including Sign Permit)
- C. _____ Certificate of Appropriateness (COA) obtained from Niles LHDC
- D. _____ Copy of Assessor Card
- E. _____ Copy of Beacon Map
- F. _____ Proof of matching funds
- G. _____ Loan Documents Approved by Sandy Naugle & Atty. Robert Landgraf
- H. _____ Closing Date Letter
- I. _____ Check Request