



SOLDOTNA

STOREFRONT IMPROVEMENT PROGRAM APPLICATION

City of Soldotna
Economic Development + Planning
177 N. Birch Street
Soldotna, AK 99669
907.262.9107
planning@soldotna.org
www.soldotna.org

Applicant Information

Applicant Name: _____ Property Owner Name: _____

Mailing Address: _____ Mailing Address: _____

Phone Number: _____ Phone Number: _____

Email: _____ Email: _____

Name of business to be improved: _____

Address of property to be improved: _____

Storefront Improvements

Describe the improvements you plan to make to your storefront, and why you are seeking City funds for the project:

Are you planning additional improvements to the property, which you will not seek reimbursement for through this grant? If so, please describe the total scope of work.

Estimated cost of the storefront improvements: \$ _____

Estimated cost of other work (if applicable): \$ _____ Total \$ _____

Projected start date: _____ Estimated completion date: _____

Checklist. Please attach the following:

- Photos of your building, clearly showing all areas that will be improved.
- An illustration of the work you would like to do. Any of the following are acceptable:
 - A hand drawn sketch of the front of your building (does not have to be to scale)
 - A printed-out digital picture with written notes
 - A photo with post-it notes attached
 - Architectural rendering(s)
- Any other attachments you feel would help describe your project goals.

Certification by Applicant. I certify:

1. All information in this application, and all information furnished in support of this application, is given for the purpose of obtaining up to a 50% storefront improvement reimbursement grant and is true and complete to the best of my knowledge and belief.
2. The business and property owner(s) are current with all City obligations, including taxes, licenses, water revenue billings, etc.
3. I have read and will comply with the requirements outlined in the Storefront Improvement Program Guidelines.
4. I understand that the City of Soldotna must approve the proposed exterior storefront improvements in order to be eligible for grant reimbursement funding. Certain changes or modifications may be required prior to final approval. A Commitment of Funds Letter will not be processed prior to the City's receipt and approval of necessary bids for the approved work. Any work commenced prior to a Commitment Letter being issued will not be eligible for reimbursement, and any work deviating from the approved work must be *pre-approved* by the City in order for the work to be eligible for reimbursement.

_____	_____	_____
Applicant Signature	Print Name	Date
_____	_____	_____
Property Owner Signature (if other than Applicant)	Print Name	Date

Please return your completed application to the program coordinator

John Czarnezki
Director of Economic Development and Planning
Phone: 907.714.1246 | Email: jczarnezki@soldotna.org



SOLDOTNA

Sales Tax Compliance Certification

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Please complete and return this form to the City of Soldotna Planning Department.
We will contact the Kenai Peninsula Borough Sales Tax department for certification.

Business Name: _____

Business Type: Corporation Partnership Sole Proprietorship/Individual

Owner(s) Name(s): _____

Business Mailing Address: _____

Phone: _____ Fax: _____ Email: _____

As a business or individual, have you ever conducted business within the Kenai Peninsula Borough? YES NO

Soldotna Municipal Code of Ordinances (per Ordinance No. 534) requires that businesses or individuals wishing to obtain any building permit, site plan approval, conditional use permit, or zoning variance be in compliance with the Borough Sales Tax provisions.

I, _____ the _____
(Signature) (Business Title)

hereby certify that, to the best of my knowledge, the above information is correct. _____
(Date)

TO BE COMPLETED BY BOROUGH PERSONNEL

I hereby certify that the above-named business or individual(s) are, to the extent ascertainable, found to be:

In compliance with all Borough sales tax provisions

Not in compliance with all Borough sales tax provisions.

(Signature Required)
Kenai Peninsula Borough Finance Department

(Date)