



City of
Evans, Colorado

2020 Storefront Improvement Program Application

Name of Applicant: _____
(First Name, Last Name)

Legal Name of Business/DBA: _____

City of Evans Business License Number: _____

Physical Address of Business: _____

Mailing Address: _____
(Number, Street or PO Box)

(City, State, Zip)

Daytime Phone Number: _____

Email Address: _____

Type of Business: _____

Applicant is Property Owner Tenant

IF 'TENANT IS APPLICANT' (complete only if not property owner):

How many years has the business been in existence? _____

How long has the business been operating at the current location? _____

When does the current lease expire? _____

If lease expires in less than two (2) years, please explain the ability to renew: _____

Number of Full-time Employees _____

Number of Part-time Employees _____

Name of Property Owner: _____
 (First, Last)

Property Owner's Mailing Address: _____
 (Number, Street or PO Box)

 (City, State, Zip)

Property Owner Phone Number: _____

Property Owner Email Address: _____

PROPOSED IMPROVEMENTS

Please describe the proposed improvement to the property. Include at least two (2) color photograph of all areas showing the current building conditions. (Photos may be emailed to apugliese@evanscolorado.gov or provided on a USB drive) _____

A separate proposal may be attached. You are highly encouraged to submit any additional building information such as measured plans, site plans, or architectural documentation for improvements (plans, sketches, altered photos, or construction costs, permit and construction fees and taxes), with your application.

BID INFORMATION

If work will exceed \$500 in value you shall obtain two (2) bids for the proposed work and attach to application.

Bid #1 Company Name: _____
 (Contractor business name, City Location)

Bid #2 Company Name: _____
 (Contractor business name, City Location)

Which company have you chosen to perform the work? _____

Note: Verify if this company is licensed with the City of Evans, if not, they will need to be licensed with the City of Evans before work may begin or reimbursement for work may be denied.

BUDGET AND TIMING

Does the proposed project require a building permit? Yes No Unsure

If unsure please note unknown and staff will review proposal with the Community Development Staff. Please note this could affect the processing of your application and require further details prior to application being considered. Applicants or contractors are encouraged to contact the City of

Evans Building Division to determine if project requires permits. Contact Heather Utrata at 970-475-1120 or email NHS@evanscolorado.gov.

If you marked yes above, have you already applied for said permit? Yes No
 Has permit been issued? Yes, Permit Number: _____ No

Can the contractor commit to completing the work within six (6) months of program approval or by December 21, 2012, whichever occurs first? Yes No

Total overall proposed project budget: \$ _____

Total amount of funding assistance being requested: \$ _____

See Question #7 of the 2020 Storefront Improvement Program Overview for maximum and percentage reimbursement amounts.

Desired Completion Date: _____

NOTE: Project shall be completed within 6 months of approval or by December 23, 2020, whichever occurs first.

PROPERTY OWNER AUTHORIZATION

If the applicant is not the property owner, please have the property owner or an authorized representative review and co-sign this application below:

I _____ am the owner of the property located at _____
 (First, Last Name) (Number Street Name)

I have reviewed the above application and authorize the operator of _____
 (Business Name)

at said address to perform improvements described above as part of the City of Evans 2020 Storefront Improvement Program.

Property Owners City of Evans Business License Number: _____

Note: All property owners leasing property shall obtain a business license in accordance with Section 3.04.500 and 3.04.030 of the Evans Municipal Code.

Signature of Property Owner:

Signature

Date

Print Name

Application Checklist:

All information must be complete and submitted with this application or will be considered incomplete and may be discarded.

- Completed Application Form
- Letter from the Secretary of State showing the business is in good standing. Obtain and print from www.sos.state.co.us.
- Completed W-9 Form. Obtain and print from www.irs.gov/pub/irs-pdf/fw9.pdf
- Any accompanying drawings, information to clarify the project.
- Before pictures (send via email to apugliese@evanscolorado.gov or submit on a USB drive), minimum 2, more is appreciated.
- Two or more contractor bids for each project (or major elements within a project, See Question # 7 of the 2020 Storefront Improvement Program Overview for details). Quotes must be on bidder's letterhead.

I hereby certify that I have reviewed and understand the Evans 2020 Storefront Program Overview and that the information included and attached to this application is true and correct.

Printed Name of Applicant:

Signature of Applicant:

Date:

Application and materials may be dropped off or mailed to City of Evans, Economic Development Office, 1100 37 Street, Evans, CO 80620 or emailed to apugliese@evanscolorado.gov.

For Office Use only:	
Date, Time Received: _____	By: _____
Materials reviewed by: _____	Date: _____
Project Location: <input type="checkbox"/> In ERA Area <input type="checkbox"/> Not within an ERA Area	
Missing materials: _____	
Date Applicant notified of missing materials/program acceptance: _____	