



Quakertown Alive! 2024/ 26 Design Challenge Grant Application

Applicant Name: _____

Business Name: _____

Business Address: _____

Phone: _____ Email: _____

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

Contractor PA License Number: _____ Owner _____ Tenant _____

Please describe the planned improvements. If you need additional space, you may use the reverse side of this form.

The grant award is 50% of your approved project cost, up to \$5000. A joint facade improvement project is eligible for grants up to \$3,500 per property or 50% of the total project cost whichever is less.

Estimated Cost of Work: _____ Requested Grant Amount: _____

Anticipated Start Date: _____ Anticipated Completion Date: _____

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

Signature of Applicant

Date

Signature of Property Owner (if different)

Date

Return to:

Quakertown Alive!

314 West Broad Street #202

Quakertown, PA 18951

Rev/2024