

# Franklin-Simpson Renaissance Side Facade Grants

This consideration is for 50/50 matching grants, with Renaissance's cumulative total not to exceed \$1,500.  
Your request will be reviewed for appropriateness, according to the Secretary of Interior Standards.

**Grant funds will be paid only upon appropriate completion of all proposed work.**

**Building Name:** \_\_\_\_\_

**Building Address:** \_\_\_\_\_

**Building Owner's Name:** \_\_\_\_\_

- **Address:** \_\_\_\_\_

**Business Owner's Name:** \_\_\_\_\_

- **Address:** \_\_\_\_\_

**Condition of Side Façade?** \_\_\_\_\_

- **Picture attached?** \_\_\_\_\_

**Proposed Scope of Work #1:** \_\_\_\_\_

- **Estimated Cost:** \_\_\_\_\_

**Proposed Scope of Work #2:** \_\_\_\_\_

- **Estimated Cost:** \_\_\_\_\_

**Proposed Scope of Work #3:** \_\_\_\_\_

- **Estimated Cost:** \_\_\_\_\_

**Are you a member of Franklin-Simpson Renaissance?** \_\_\_\_\_

**Are you a member of the Downtown Merchants Association?** \_\_\_\_\_

**Have you previously received a Renaissance grant?** \_\_\_\_\_

- **If Yes, When?** \_\_\_\_\_ **What Kind?** \_\_\_\_\_

**Requested By:** \_\_\_\_\_ **Date:** \_\_\_\_\_

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*(This portion to be completed by Renaissance)*

**Building is:**    *Contributing* ( )    *Non-Contributing* ( )

- **If Non-Contributing, Why?** \_\_\_\_\_

**Conditional Approval (Prior to starting work):**    *Approved* ( )    *Denied* ( )

**If Denied, explain** \_\_\_\_\_

**Design Chair:** \_\_\_\_\_ **Date** \_\_\_\_\_    **Director** \_\_\_\_\_ **Date** \_\_\_\_\_

**Final Approval (Upon completion of work)**    *Approval* ( )    *Denied* ( )

**If denied, explain** \_\_\_\_\_

**Design Chair** \_\_\_\_\_ **Date** \_\_\_\_\_    **Director** \_\_\_\_\_ **Date** \_\_\_\_\_