



## Storefront Improvement Program Application



Please return completed applications and supplemental documents to:

**City of Stanwood**  
Attn: Economic Development  
10220 270<sup>th</sup> St NW  
Stanwood, WA 98292  
Email: [econdev@stanwoodwa.org](mailto:econdev@stanwoodwa.org)

**Contact:**  
Sarah Cho  
Economic Development and Marketing Manager  
(360) 454-5210  
[sarah.cho@stanwoodwa.org](mailto:sarah.cho@stanwoodwa.org)



A **pre-application meeting** with the City is required before an application can be submitted. The pre-application meeting with help determine whether a project is eligible for the Storefront Improvement Grant.

The following items are required to be submitted for a complete application. ***Incomplete applications will not be accepted.***

- Signed Application Form
  - Contact Info for Business Owner/Applicant, Property Owner, and Contractor(s)
  - Detailed Project Narrative
  - Detailed Project Budget
  - Detailed Project Timeline
  - Source(s) of Matching Funds
- Photographs of Current Conditions
- Renderings of Proposed Project
- Federal W-9 Form
- Any architectural, engineering or building documents (if applicable)

<b>Business Owner Information</b>			
<i>Name of Applicant:</i>			
<i>Business Name:</i>			
<i>Phone Number:</i>			
<i>Email:</i>			
<i>Business Physical Address:</i>			
	<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Business Mailing Address:</i>			
	<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Assessor's Parcel Number:</i>			
<i>Type of Business:</i>			
<i>EIN #:</i>			
<i>WA UBI #:</i>			

<b>Property Owner Information (If not applicant)</b>			
<i>Name of Property Owner:</i>			
<i>Phone Number:</i>			
<i>Email:</i>			
<i>Property Address:</i>			
	<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Mailing Address:</i>			
	<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Years Owned:</i>			



<b>Contractor Information</b>			
<i>Name of Business:</i>			
<i>Contractor's Name:</i>			
<i>Phone Number:</i>			
<i>Email:</i>			
<i>Contractor Physical Address:</i>			
	<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Contractor Mailing Address:</i>			
	<i>City:</i>	<i>State:</i>	<i>Zip:</i>
<i>Type of Business:</i>			
<i>EIN #:</i>			
<i>WA UBI #:</i>			
<i>Contractor's License #:</i>			



Project Information	
Improvement Type (select all that apply):	<input type="checkbox"/> Signage <input type="checkbox"/> Awnings <input type="checkbox"/> Paint <input type="checkbox"/> Doors and Windows <input type="checkbox"/> Streetscapes <input type="checkbox"/> Creative and Imaginative Exterior Elements
Brief Project Description (Please describe the scope of the proposed improvements, including descriptions of the building's current conditions):	
Estimated Total Project Cost:	
Requested Grant Amount:	(Not to exceed \$20,000, 1:1 match. For example, a \$2,000 project can receive up to a \$1,000 grant award. A \$50,000 project can receive up to a \$20,000 grant award)

Project Budget	
Project Element:	Total \$ Costs:
Example: Quote for new pedestrian signage	\$1,000

Project Total Amount: \$ \_\_\_\_\_



Project Timeline	
Project Phase:	Anticipated Dates:
Construction Start	
Construction Complete	

Source(s) of Matching Funds		
Source of Match (Cash, Loan, In-Kind)	Description of Work/Source of Funds:	Total \$ Amount:
<i>Example: In-kind</i>	<i>Example: In-kind donation of paint supplies</i>	<i>Example: Estimated \$500</i>

Matching Funds Total Amount: \$ \_\_\_\_\_



The applicant understands that the City of Stanwood must approve the proposed project and improvements. During the application process, the City will require a site visit of the business/property with City staff. Changes or modifications may be required by the City prior to final approval. Grant reimbursement will be processed once all receipts and documents have been submitted. Unless otherwise agreed, work must be performed by a licensed contractor, sign maker, or other recognized professional. 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 for the work to be eligible for reimbursement.

The applicant certifies that all information in this application and all information provided in support of this application is given for the purpose of obtaining a Storefront Improvement Program grant and is true and complete to the best of the applicant's knowledge. If the applicant is not the owner of the property of the proposed project, or if the applicant is not the sole owner of the property, the applicant certifies that they have the authority to sign and enter into an agreement to perform the project on the property. Evidence of this authority must be attached to the application. Verification of any of the information contained in this application may be obtained by the City from any available source.

### **Business Owner/Applicant**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Property Owner**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### **Contractor**

Print Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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