

DOWNTOWN IMPROVEMENT DISTRICT 2019 Matching Grant Program Application

	General Ir	nformation	
Applicant Name:			
Address:			
	Street Address		Unit #
	City	State	ZIP Code
Phone Number:			
Email Address:			
Federal Tax ID:			
	Project	Location	
Project Name:			
Project Address:			
	Street Address		Unit #
	City	State	ZIP Code

Will the proposed project be constructed on private property?

□ Yes*

□ No

*If yes, it is the responsibility of the applicant to provide written consent from the property owner allowing for the construction of the proposed project. Please provide the property owner's contact information below.

Property Owner Name	e:				
Property Owner Addr	ress:	Street Address		Unit #	
		City	State	ZIP Code	
Property Owner Phone Number:					
Property Owner Email Address:					
		Project Descript	ion		
Project Type: (select all that apply)		Security Project: the project will improve public security, help deter crime, and enhance the perception of public safety Pedestrian Enhancement Project: the project will increase pedestrian safety and comfort in the public right-of-way Appearance Project: the project will improve the outward appearance of a building or public space			
Please describe the purpose of the proposed project. Attach additional pages if necessary.					

Please describe the purpose of the proposed project. Attach additional pages if necessary.

What issues does the proposed project address? Attach additional pages if necessary.

What are the objectives of the proposed project? Attach additional pages if necessary.

What transformative strategies of the *360 Plan* will the proposed project address? Describe how the proposed project will further those strategies' goals. Attach additional pages if necessary.

Applicants are responsible for the general operations and ongoing maintenance of the proposed project, once it is complete. What are the maintenance requirements of the proposed project?

Who will fund and provide ongoing maintenance of the proposed project?

In an effort to meet the City of Dallas Good Faith Effort Plan, proposed projects should include at least a 25% participation rate of minority- and women-owned business enterprises (M/WBEs) in the project's construction. Will M/WBEs participate in the proposed project's construction?

□ Yes □ No If yes, what is the anticipated participation rate of M/WBEs in the proposed project?

Will the proposed project require the approval of other entities or organizations, such as the City of Dallas?

Yes
No

If yes, what entities must provide approval? What is the schedule for such approvals?

Grant Request

Grant Request Amount: Must be less than or equal to Applicant's Contribution	\$
Applicant's Contribution:	\$
Total Cost of Proposed Project:	\$

Estimated Project Schedule

Construction Plans:		
	Date	
Permits Secured:		
	Date	
Construction Begins:		
<u> </u>	Date	
Project Completion:		
	Date	

Required Documentation

Check the documents that are included with this application. Incomplete applications will not be accepted.

- Complete 2019 Matching Grants Program Application
- □ Map of proposed project location
- Signed approval letter from the owner (or agent) of property upon which the project will be constructed (if applicable)
- List of proposed M/WBE contractors (if applicable)
- Budget Summary (to include job estimates or quotes, if available)
- □ Color photographs of project area
- □ Schematic drawings of proposed project
- □ Certificate of Liability Insurance
- □ IRS Form W-9

Certification

As duly authorized representative of the entity making this grant application, I hereby certify that all of the information provided herein is true and represents the desires of this organization, and will assure that funds received as a result of this application will be used only for the purposes as stated in the application and that the project is on schedule for completion within six months from the date of grant approval.

Signature of Authorized Representative

Date

Printed Name and Title of Authorized Representative