Commercial Revitalization Rebate Program Application

Applicant Name: _____

Property Owner Name (if different): _____

Property Address: _____

Telephone: _____

List improvements you feel are necessary at this property:

	List Improvements	1st Contractor Name	1st Contractor Quote (lowest)	2nd Contractor Name	2nd Contractor Quote (highest)
1			$		$
2			$		$
3			$		$
4			$		$
5			$		$
		Total Project Cost Range:	$	to	$

Provide a brief narrative as to why the renovations are needed and what impact an approved rebate will have for you, your business, or your property (attach additional sheet, if necessary):

_____

_____

_____

_____

_____

_____

_____

Attachment Checklist:

___ Copies of all Contractor, Engineer, or Architect Quotes/Bids. All pricing submitted shall exclude sales tax, as the City is exempt from payment of sales tax.

___ Photos of current state and drawings or renderings of post-renovation.

___ Copy of your deed, mortgage, land contract or other verification of ownership. If you're a tenant, written approval from the property owner is required to complete the proposed project.

___ Copy of Form W-9, Request for Taxpayer Identification Number and Certification.

I hereby request a rebate to assist in the rehabilitation/renovation of my commercial property as outlined above. I understand that the approval of this rebate will require the prior approval of the proposed exterior improvements by the Plymouth Common Council.

Signature of Applicant: _____ Date: _____