TIFA \$25,000 Restaurant Attraction Grant Application



Applicant Information:

Name		
Mailing Address		
Phone Number		
E-Mail Address		
Business Name		
Project Address		
Property Owner Name		
Description of Proposed Improvements: (including design and/or architectural elements to be used)		
Attach additional pages as neces	sary).	
Estimated Total Cost of Propo	osed Improvements: \$	
Approved Grant Amount: \$		
Agreement and Signature		

By submitting this application, I (we):

- Affirm that the information provided herein is true and accurate to the best of my (our) knowledge and
- Acknowledge that I (we) have read and understood the terms and conditions of the City of Hillsdale TIFA \$25,000 Restaurant Attraction Program.
- Understand that no work prior to TIFA approval may be included in the project application.
- Understand that if my (our) application is approved that I (we) will be required to sign a Restaurant Attraction Agreement prior to commencement of work on proposed project.
- Allow any photos, renderings, or descriptions of the work to be performed on said project to be used by the City of Hillsdale TIFA for promotional purposes.
- Understand that this application and all supporting documentation are subject to the Freedom of Information Act (FOIA).

Name (printed)	
Signature	
Date	
Name (printed)	
Signature	
Date	

Please attach the following items:

1) Brief narrative explaining the scope of the project. 2) Detailed cost estimate(s) from licensed contractor(s). 3) Proposed project timeline. 4) Letter of permission from property owner stating their approval of the application for assistance and proposed improvements (if applicable). 5) Five (5) year business plan. 6) Five (5) year lease agreement, (if applicable). 7) Engineered drawings of the project (if applicable).