

Richmond Highway
FACADE IMPROVEMENT PROGRAM
GRANT APPLICATION

Date Application Submitted _____

Applicant _____

Tax Payer ID # _____

Building Owner Tenant

Property Address _____

Mailing Address _____

Phone number where you can be reached during the day _____

Email Address _____

Name of Owner, if different from Applicant _____

Circle One: Is owner aware of application? Y N Is there owner approval? Y N

Is there a rental agreement? Y N

Type of Improvements being proposed: (Check all that apply)

Exterior facade Sign Site Other: Please explain below

All proposed improvements to the site **MUST** be submitted to the Fairfax County Office of Community and Revitalization and Reinvestment (OCRR). Once OCRR determines that the application meets all of the requirements, a copy will be sent to the Southeast Fairfax Development Corporation (SFDC). The SFDC will then contact the applicant to schedule a work session with the Design Review Committee (DRC).

Please submit the following information to OCRR.

- A. Photographs clearly showing existing conditions of the building to be improved;
- B. A written summary of the proposed work;
- C. A site plan or a location plan for landscape, sign, parking, and lighting projects;
- D. Architectural drawings that adequately and comprehensively show the proposed project including details of cornices, windows, decorative elements, signs, etc;
- E. Exact samples of paint, colors, and materials;
- F. A cost estimate provided by a Class A or B contractor;
- G. The property agreement, if owner is different from applicant;

Total cost of Improvements _____ Grant amount requested _____

I understand that in order for my request for a facade improvement grant to be approved, I must agree to work with the SFDC Design Review Committee and to follow the Richmond Highway Facade Improvement Design Guidelines. I also understand that monies are granted on a reimbursement basis following completion of work and approval by the Fairfax County Office of Community Revitalization and Reinvestment (OCRR). I also understand that any changes made to the project after the grant approval that have not been approved by the Design Review Committee will not be eligible for funding and may disqualify the entire project for the grant funding. I also certify that if I am a tenant of the aforementioned property that, I have obtained authorization from the property owner to complete the project and obtained necessary changes to my rental agreement.

Signature of Applicant _____

Project # _____
(to be provided by SFDC)

<i>Richmond Highway</i>
FACADE IMPROVEMENT PROGRAM
GRANT REVISION

Project Number _____

Property Address _____

Applicant _____ Tax Payer ID # _____

Phone Number _____

Email Address _____

Revision _____ Date: _____

Scope of Revision _____

Accepted

Denied: reasons and recommendations _____

by SFDC Executive Director _____

Revision _____ Date: _____

Scope of Revision _____

Accepted

Denied: reasons and recommendations _____

by SFDC Executive Director _____

Revision _____ Date: _____

Scope of Revision _____

Accepted

Denied: reasons and recommendations _____

by SFDC Executive Director _____

Revision _____ Date: _____

Scope of Revision _____

Accepted

Denied: reasons and recommendations _____

by SFDC Executive Director _____

