

Downtown Muskegon Heights Facade Improvement Grant

Application- Small Business

Applicant Information

Applicant Name: _____

Business Name: _____

Business Address: _____

Current Use of Property: _____

Contact Number: _____

Email Address: _____

Annual Business Revenue: _____

Number of Employees: _____

Property Owner Information (if different from applicant)

Property Owner Name: _____

Property Owner Address: _____

Contact Number: _____

Email Address: _____

Project Description

1. Scope of Work

Provide a detailed description of the work to be completed. Include the types of materials to be used and how the improvements will enhance the building's appearance and the overall streetscape. (Such as painting, signage, windows/doors, awning, accessibility):

Example: The project involves repainting the front facade in a modern, vibrant color scheme that aligns with the city's revitalization goals. Additionally, new non-reflective (clear), energy-efficient windows and a custom-designed sign will be installed. The improvements aim to attract more foot traffic and contribute to a welcoming downtown environment.

2. Objectives

Explain the objectives of your façade improvement project and how it aligns with the community's development goals.

Example: The object is to enhance the visual appeal of Main Street, increase customer attraction and retention for our business, and support Muskegon Heights' broader economic development and beautification efforts.

3. Benefits to the Community

Discuss how the facade improvements will benefit the community, such as increasing property values, attracting new businesses, or improving public perception.

Example: The facade improvements will not only boost our business but also enhance the aesthetic appeal of the entire block, encouraging more local shopping and dining. This project aims to stimulate economic activity and contribute to the vibrant community atmosphere.

Estimated Budget

Item Description	Estimated Cost
Painting	\$
Window/Door Replacement	\$
New Signage	\$
Lighting*	\$
Masonry/Exterior Siding	\$
Other (describe)	\$
Total Estimated Cost	\$

*Include photo of electrical panel

Funding Request - (*Grant funding is limited to a maximum of **\$10,000**)

Total Project Cost: \$ _____

Amount Requested: \$ _____

Applicant Contribution: \$ _____ (20% of the total project cost, if total cost is over \$1,000)

Reimbursement

The committee will issue payments directly to the contractor, unless work is being done by the business/building owner.

If this project is part of a broader renovation, please break it into phases. We will reimburse—or issue payment directly to the contractor—for the phase that focuses on the exterior once that phase is completed.

Provide evidence of financial ability to complete the project with the understanding that the grant funds will only be disbursed upon completion of the project (or phase).

If any zoning or planning commission approvals are required, we will need those before funds can be disbursed.

Project Timeline

Milestone	Estimated Completion Date
Permit Acquisition (if required)	
Commencement of Work	
Project Completion (must be completed within 6 months of grant approval)	
Final Inspection (if required)	

Attachments

Project Photos: *Before photos of the current façade/building.

Design Renderings: Artistic renderings or sketches (if available) and/or written description of the proposed improvements.

Cost Estimates: Detailed cost estimates or quotes from contractors.

Proof of Ownership: Deed or lease agreement.

Consent Letter: Written consent from the property owner (if applicable).

*Final Photo after Project Completion

Authorization

I hereby certify that the information provided in this application is true and correct to the best of my knowledge. I understand that the approval of this grant is contingent upon compliance with the program guidelines and available funding.

Applicant Signature: _____

Date: _____

Please submit the completed application along with all required attachments to Greater Muskegon Economic Development (GMED) at 380 W. Western Ave., Muskegon, MI, 49440 or via email at cbrubakerclarke@developmuskegon.org. Do not start work until application is approved.

For any questions or additional information, please contact Cathy Brubaker-Clarke at cbrubakerclarke@developmuskegon.org.

Thank you for your commitment to improving the community of Muskegon Heights. The application will be reviewed by the GMED- Muskegon Heights Façade Grant Committee. We look forward to reviewing your application.



DDA