**CITY OF OLYMPIA - COMMUNITY DEVELOPMENT BLOCK GRANT
Program Year 2017**

**DOWNTOWN SAFETY PROGRAM APPLICATION**

**DEADLINE:  *April 1 2018***

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| Amount Requested: |        |
| Project Title: |       \_\_\_\_\_\_\_ |
| Short Project Description: |        |

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| **APPLICANT INFORMATION:** |
| Owner/Manager: |        |
| Business Name: |        |
| Type of Business(es):Other Tenants:Street Address: |                    |
| Mailing Address: |        |
| Email Address: |        | Website: |        |
| Phone: |        | FAX: |        |
| Application Contact Person: |        |
| Years in Existence |        | # of Staff: |        | Annual Sales: |        |
| Type of Business: | [ ]  Public Agency | [ ]  Private Non-Profit (501c3) | [ ]  Partnership |
| [ ]  Corporation | [ ]  Sole Proprietorship | [ ]  Other |
| Federal Tax ID #:State UBI #: |              | DUNS# (Required):Other License #:  |              |
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| **CERTIFICATION:**As the applicant, I certify that all the information submitted is true and accurate, and that this business is licensed to do business in the City of Olympia, Washington. Further certification of business and property insurance, other required licenses will be submitted upon request. |
|  **Signature – Applicant** | **Title** | **Date** |
| **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Signature – Building Owner** | **Title** | **Date** |

**NARRATIVES**

All narrative responses to clarify **proposed Downtown Safety project(s**) in detail, not to exceed five additional pages beyond the cover sheet. For Downtown Safety Program guidance, please refer to the fact sheet or contact the City representatives. Please note: Applicant can submit concepts and continue to pursue designs and cost estimates after submission of proposal.

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| **PROJECT DESCRIPTION:**  |

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| **POTENTIAL LEVERAGE: (Private funds, equipment, volunteers and volunteer support, etc…)**  |

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| **PROJECT BUDGET:** |
| Work Description | Private Funding | Other Funding(amount & source) | CDBG Funding | Total Estimated Costs |
|       |       |       |       |       |
|       |       |       |       |       |
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| **TOTAL:** |       |       |       |       |

**Attachments requested but NOT required:**

1. Site plan
2. Conceptual design or drawing(s)
3. Cost estimates from licensed contractors