



TOWN OF HAMDEN

SMALL BUSINESS FAÇADE IMPROVEMENT PROGRAM

APPLICATION FORM

Application Date:

Application ID: *(Office Use Only)*

SECTION I: BUSINESS INFORMATION

Business Name:

Doing Business As (DBA):

Business Address:

Mailing Address (if different):

Business Phone: _____ **Email:** _____

Website: _____

Federal Tax ID/EIN: _____

CT Business Registration Number: _____

Type of Business Entity: Sole Proprietorship Partnership Corporation LLC Other: _____

Date Business Established: _____

Date Operations Began at Current Location: _____

Total Number of Employees: _____

Business Description/Products/Services Provided:

Specific Improvements Requested (check all that apply):

- Restoration of original architectural features
- Removal of elements covering original design
- Business signage installation/replacement
- Awning installation/replacement
- Exterior painting
- Masonry cleaning/repointing
- Door replacement
- Window replacement
- Stair/porch/railing replacement
- Exterior lighting installation/upgrade
- Architectural element replacement
- Building code violation correction
- Accessibility improvements
- Landscaping improvements
- Other:

Project Timeline: Proposed Start Date:

Proposed Completion Date:

Expected Project Duration:

SECTION VIII: BUSINESS SUSTAINABILITY

Years in Business at Current Location:

Annual Gross Revenue (optional but helpful for evaluation):

- Under \$100,000 \$100,000-\$250,000 \$250,000-\$500,000
 \$500,000-\$1,000,000 Over \$1,000,000

How will this project benefit your business?

How will this project benefit the surrounding community?

SECTION IX: COMPLIANCE CERTIFICATIONS

- Business has been in operation for at least 6 months
- Business has 25 or fewer employees
- Business is not a franchise operation
- Business is in eligible census tract (1651, 1655, or 1656)
- All federal, state, and local taxes are current
- No outstanding liens with the Town of Hamden
- All required business licenses and permits are current
- Business will maintain operations in Hamden for a minimum of three (3) years after grant award
- Business will comply with all applicable laws, codes, and regulations
- Business agrees to participate in monitoring visits for three years
- Business will display temporary signage acknowledging CDBG funding during construction
- Understanding business will follow the town's procurement ordinance
- Understanding that work cannot begin until environmental review is completed

SECTION X: REQUIRED ATTACHMENTS

Check all items included with application:

- Complete application form
- Business plan or business summary
- Detailed project description and scope of work
- Design sketches, renderings, or architectural plans
- Procurement documentation
- Proof of property ownership OR signed lease agreement
- Property owner written authorization (if business leases property)
- Tax compliance verification (Town, State, Federal)
- Current business license(s)
- Professional license(s) if applicable
- Current photographs of area to be improved (minimum 4 photos)
- Certificate of Good Standing (corporations/LLCs)
- Articles of Incorporation or Organization (if applicable)

SECTION XI: APPLICANT CERTIFICATION

I hereby certify that:

1. All information provided in this application is true and accurate to the best of my knowledge.
2. I understand that providing false information may result in denial of the application or recapture of awarded funds.
3. I understand that this is a reimbursement program and that all project costs must be paid by the business before reimbursement.
4. I agree to comply with all program requirements including the three-year operational commitment.
5. I understand that all work must comply with Town ordinances, building codes, and CDBG requirements.
6. I understand that no work may begin until environmental review is completed and clearance is provided by the Town.
7. I agree to allow the Town to use business name and project details in promotional materials.

8. I agree to comply with all nondiscrimination requirements under federal, state, and local law.
9. I understand that grant awards are subject to available funding and meeting minimum scoring criteria.
10. I understand that substantial project changes require prior written approval from the Town.

Applicant Signature:

Print Name:

Title:

Date:

FOR OFFICE USE ONLY

Date Application Received:

Reviewed By:

Application Complete: Yes No Missing Items:

Recommendation Amount: \$

Economic and Community Development Department

Final Decision: Approved Denied

Decision Date:

CONTACT INFORMATION

Town of Hamden
Economic and Community Development Office
2750 Dixwell Avenue
Hamden, CT 06518
Phone: (203) 287-7000
Email: cdbg@hamden.com
Website: <https://www.hamdenedc.com>

Application Deadline: Rolling basis with quarterly award cycles