

Historic Preservation Grant Programs

APPLICATION



Daytona Beach CRA

Type: Residential Commercial

Redevelopment District _____

Historic District _____

Applicant (Property Owner) _____ Telephone (Business /Cell) _____

Federal I.D. Number _____

Project Description: _____

Building Proposed Improvements:

	Improvement	Total Cost	Match	Grant
1.		\$	\$	
2.		\$	\$	
3.		\$	\$	
4.		\$	\$	
5.		\$	\$	
6.		\$	\$	
7.		\$	\$	
8.		\$	\$	

Estimated Construction Time: _____ days Estimated Completion Date: _____

Applicant Signature: _____ Date: _____

FOR OFFICE USE:

Contributing Historic Building
 Eligible Projects

Application Checklist:

- Proof of Ownership
- Written Consent of Owner
- Completed application form
- Two work estimates
- Applicant does not owe the City
- Photograph of the existing building
- Drawings of proposed improvements

Approval:

Application received by: _____
 Improvements meet Design Standards:
 _____ Date _____
 Redevelopment Director Approval:
 _____ Date _____
 Historic Preservation Board Approval:
 _____ Date _____