



**AFFORDABLE APARTMENT IMPROVEMENT  
GRANT PROGRAM  
Application**

**APPLICANT INFORMATION**

Name of Applicant(s)	
Address of Subject Property	
Applicant(s) current address	
Applicant(s) phone number	
Applicant(s) email address	
Amount of Grant Requested	
Amount and Source of Match	

**APPLICATION REQUIREMENTS:**

- Picture of the Property, front as well as area(s) to be improved (digital format)
- Rehabilitation Plan (use form in Attachment A)
- Copy of Bid(s)

**APPLICANT(S) SIGNATURE(S)**

Signature	Date
Signature	Date

*Date Received:* \_\_\_\_\_



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**PROJECT INFORMATION**

Provide a description of improvements to be made:

Contractor(s) and subcontractors:

Company	Contact Name	Phone Number

**PROPERTY INFORMATION**

Total # of units in building to be improved			
Rents charged by unit size			
# of Efficiency/Studio units:		Rent range:	
# of 1 bedroom units:		Rent range:	
# of 2 bedroom units:		Rent range:	
# of 3 bedroom units:		Rent range:	



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### REHABILITATION PLAN

PROPERTY ADDRESS: \_\_\_\_\_

	ITEM - DESCRIPTION	CONTRACTOR	COST ESTIMATE
	<i>Example: Replace Roof</i>	<i>A-1 Roofing</i>	\$ 25,000
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			
		<b>TOTAL</b>	\$

	SOURCE OF FUNDS	AMOUNT
1.	Richfield HRA	\$
2.		
3.		
4.		
		<b>TOTAL</b>
		\$

If applicable, attach plans prepared by a qualified draftsman or architect.