

Façade Mini-Grant Application

Deadline: March 31, 2012

**Complete applications and all supporting materials must be received or postmarked
by this date at HRPS P.O. Box 14003 Reno NV 89507**

APPLICANT INFORMATION

Name _____ Telephone _____
Business (if applicable) _____
Project Address _____ Zip _____
Mailing Address (if different) _____
Contact Email _____

PROJECT SUMMARY

Project Total Cost _____
Amount Requested _____
Match provided _____
Match type _____ cash In-Kind (donated labor/materials) _____
Anticipated start time _____ Expected Completion date _____
Note: schedule of completion for the improvements must conform to the 90 day timeline of the mini-grants
Reno Neighborhood (check one) _____ University District _____ Wells Avenue area
 _____ Powning's Addition _____ Southwest Reno _____ Other
Date Structure was Built _____
Significant features (historic, architectural, etc.) or interesting facts about the structure _____

NARRATIVE

*Please provide a detailed description of the proposed improvements you wish to make to your building
façade. You may attach one additional page if needed.*

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Attachments Required (incomplete applications will be disqualified)

- 1) Provide an itemized estimate of all materials, supplies and labor costs of this project. Please provide a copy of the Nevada Contractors license number, when applicable.
- 2) Provide a sketch or scaled drawing of the proposed renovation work.
- 3) Provide current photograph of 1) building itself 2) within the context of the streetscape clearly showing the existing conditions of the proposed area of improvement.
- 4) Written plans for future improvements to the building and proposed time frame for such work.
- 5) Samples of all paint colors or images of other items to be purchased (if applicable).
- 6) A signed original of the application and five additional photocopies of the application; only one set of attachments is required.

CERTIFICATION of Authorized Property Owner

I have read and fully understand the requirements and Guidelines of the Historic Reno Preservation Society's Neighborhood Preservation Fund and agree to comply with all its requirements, including the funding match requirements. I further certify that the information contained in this report is true and correct to the best of my knowledge

Signature _____

Date _____

HRPS Information

Date Application Received _____

Key Panel Reviewer _____

Funded _____ **yes** _____ **no**

Application Complete _____ **yes** _____ **no**

Decision Date _____

Date Applicant Notified of results _____