

Dahlonga 2000, Inc.

Façade Grant Application

DESIGNATED PROPERTY

Name: _____

Address: _____

OWNER

Name: _____ Phone: _____

Address: _____

PERSON FILING APPLICATION, IF OTHER THAN OWNER

Name: _____ Phone: _____

Address: _____

BUILDING DATA

Date of Construction _____

ORIGINAL USE

- ___ Office
- ___ Commercial/Retail
- ___ Industrial
- ___ Institutional
- ___ Residential

CURRENT USE

- ___ Office
- ___ Commercial/Retail
- ___ Industrial
- ___ Institutional
- ___ Residential
- ___ Vacant

TYPE OF WORK

- ___ Exterior Restoration
- ___ Exterior Alteration
- ___ New Construction
- ___ Other (briefly describe _____)

Proposed Starting Date

Proposed Date of Completion

