



GRANT APPLICATION

Façade Improvement

374 East Main, Vernal, Utah 84078
www.vernalcity.org

Phone (435) 789-2255
 FAX (435) 789-2256

Fill out completely INCLUDING ALL SIGNATURES. Include any appropriate supplemental documentation.
 THE AWARDING OF GRANTS IS BASED ON AVAILABILITY OF FUNDS

SITE INFORMATION: Site must be within the boundaries of the Downtown Community Reinvestment Area (CRA).	
Address(s):	
County Parcel Number(s):	
Property Owner(s):	
Business(s) on Site:	

PROJECT INFORMATION: Attach documents, such as bids and estimates, demonstrating costs. This grant may be used to reimburse up to forty percent (40%) of the cost of the project with a maximum total disbursement of \$100,000 regardless of total project cost. The minimum eligible total project cost is \$2,000 (grant total of \$800).	
Total Cost of Project (estimate):	
Source of estimate (contractor bid, owner estimate, architect estimate, other):	
Proposed Start Date:	Proposed Completion Date:

APPLICANT	
Name:	
Address:	Telephone:
-----	email:
I certify that this information, including any attachments, is correct to the best of my knowledge. I understand that the award of any amount of grant is fully at the discretion of Vernal City and its appointed agents. I further understand that other applications and permits may be required for this project, such as a building permit.	
Signature (applicant):	Date:
I have read and understand the current Downtown Vernal Façade Grant program.	
Signature (property owner):	Date:

FOR OFFICE USE ONLY

Application Number _____ Date _____ By _____
 Grant Awarded (y/n) _____ Amount: _____ Cross Reference _____
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