TO BE COMPLETED BY THE CDC

City of Cleveland
Storefront Renovation Program
Sign-Only Rebate
ELIGIBILITY ASSESSMENT

(Effective February 1, 2016 through December 31, 2016)

The Storefront Renovation Program offers a financial incentive, through a 40% (up to $3,000) Sign-Only Rebate, combined with free design assistance, to support new businesses located in previously rehabilitated buildings. This financial assistance is meant to improve the quality and design of signage in Cleveland’s commercial districts.

A. Property Information

Project Name (if applicable): __________________________________________________________

Property Address: _________________________________________________________________

Permanent Parcel Number: ___________________________ Ward: ____________

Legal Owner of Property: __________________________________________________________

B. Eligibility

Please select one or both of the following:

☐ The business is located in a previously renovated building in the SRP Target Area; or

☐ The business is located in a building that has participated in SRP.

If Applicant answers “No” to any of the following, building is ineligible for participation in SRP:

☐ Are the property taxes current?  Yes - or - No

☐ The proposed signage is for a first or second-floor business with a dedicated main street entrance?  Yes - or - No

☐ Is the applicant willing to spend at least $1,000 on signage?  Yes - or - No

C. Applicant Information

Applicant’s Name: ________________________________________________________________

Applicant’s Business Name (if different from above): ____________________________________

Mailing Address: _________________________________________________________________

Street: ___________________________ City: ____________ State: ____________ Zip: __________

Applicant Phone Number: (______) _______ Alternate Phone Number: (______) _______

Applicant e-mail Address: __________________________________________________________

Applicant is: ☐ Building Owner -or- ☐ Building Tenant (if tenant, current lease expires on: / / )

D. Additional Information

Name of CDC Representative filling out form: __________________________________________

CDC Name: ____________________________

Contact Phone: (______) _______ Contact e-mail: __________________________

Date form completed: / / Date form received by City: / / __________

Prior to e-mailing SRP Eligibility Form to the City, please ensure that a current photo of main elevation of building (not image taken from Google Maps or other online source) is attached.

E-mail form and photo to: tsandy@city.cleveland.oh.us

To be completed by City Design Specialist:

☐ Building is rehabilitated, maintained, with eligible commercial space;

☐ Building is ineligible.

Reasoning: ________________________________________________________________

__________________________________________________________

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