Completed Application	
Application Checklist (this form)	
Copy of Lease Agreement or Written Property Owner Authorization (if occupied by tenant)	
Drawings of proposed Storefront Improvement - A conceptual drawing/plan of what the storefront or site will look like after work is completed.	
 For a large project, include a site plan. 	
 For a smaller project, a simple sketch may be appropriate. The sketch must include sufficient detail, including product sample sheets of design elements such as windows, doors, lighting, awnings, colors, type of materials. 	
Photos of your Building or Property Site	
Any other attachments or documentations that would be helpful for consideration of your improvement project	
Read and reviewed the Storefront & Streetscape Improvement	



SUBMIT APPLICATION BEFORE
FRIDAY, APRIL 11th at 5:00 P.M. to City Hall located at 210 Fidalgo Avenue, Kenai, AK 99611 or via email at planning@kenai.city.

APPLICANT AND BUSINESS INFORMATION:

NAME OF BUSINESS:				
BUSINESS OWNER NAME (IF DIFFERENT):				
BUSINESS OWNER MAILING ADDRESS:				
EMAIL:	PHONE:			
BUSINESS OWNER TAX ID NUMBER:				
PROPERTY OWNER NAME:				
PROPERTY OWNER ADDRESS:				
EMAIL:	PHONE:			
PROJECT INFORMATION:				
FUNDING AMOUNT REQUESTED:				
PROJECT LOCATION:				
NUMBER OF BUSINESSES ON THE PREMISES:				
TYPE OF OWNERSHIP: Corporation Pa	rtnership Sole Proprietor LLC Non-Profit Other			
DESIGN FIRM/ARCHITECT, if needed:				
HOW LONG HAVE YOU BEEN IN BUSINESS?				
I/we attest that all information provided in this entire application is true and correct to the best of my/our knowledge and that no information has been excluded which might reasonably affect funding. I/we authorize the City of Kenai to obtain verification from any source provided.				
NAME (print):	NAME (print):			
SIGNATURE:	SIGNATURE:			
DATE:	DATE:			

Please read the statements below and initial to confirm that you under	stand:
I/we understand that the city of Kenai must approve the proposed exterior store streetscape improvement(s) in order to be eligible for grant reimbursement funding.	front &
I/we have attached a copy of all current leases or property owner authorization (if app	icable).
I/we certify that there re no outstanding property taxes, utilities, or other past due bill City of Kenai or Kenai Peninsula Borough.	s to the
I/we have attached relevant photos of the building façade(s) and/or property sit included in this program.	e to be
I/we have reviewed the program overview and guidelines, have familiarity with respon of each party and understand that the City shall not assume any liability for this or a agreements.	
I/we have read and understand the City of Kenai's Program Guidelines, according to the Life of the Lif	
qualifications and conditions, and through signature(s) below, certify that I/we are qua and will abide by such conditions set forth in this application and all reasonable condi which may be issued by the City of Kenai in the implementation of this program.	
I/we understand that this is a grant program, under which the City of Kenai has the	right to
approve or deny any project or proposal or portions thereof.	
NAME (print): NAME (print):	
SIGNATURE: SIGNATURE:	
DATE: DATE:	