1 City Hall Plaza, Ellsworth, Maine 04605

Communications Director, Maura Condon mcondon@cityofellsworthme.org (207) 669-2563
Planning and Community Development Assistant, Brittany Merrill bmerrill@cityofellsworthme.org (207) 669-6608
Finance Director, Nate Moore nmoore@cityofellsworthme.org (207) 669-6624
City Website: https://www.ellsworthmaine.gov/

Downtown Façade Improvement Program
Application Form

For more information visit: ellsworthmaine.gov/dfip/
Application Deadline is March 14, 2025 at 12:30 PM.

I. APPLICANT INFORMATION

1. Applicant's Name: _____
   Business Name: _____
   Mailing Address: _____
   Telephone Number(s): _____
   Fax Number: _____
   E-mail Address: _____
2. Business Organization of Applicant: (Please check one)
   Corporation (d/b/a) _____
   Partnership _____
   Sole Proprietorship _____
3. Owner(s) and Officer(s) in Applicant's Business Organization

   Name and Address Position

   _____
   _____
   _____
4. Relationship of Applicant to the building to be renovated under Façade Improvement Program:
   Owner: _____
   Tenant: _____ ; if yes please
   a) Attach terms, length, and expiration date of present lease, and
   b) Attach written permission from building owner to participate in Façade Program
5. Have all City of Ellsworth taxes levied on the building and property described in this application been paid to date? Yes _____ No _____

II. PROPOSED PROJECT INFORMATION

1. Description of Building to be rehabilitated:

   Street Address: _____

   Building Dimensions:

   Front: _____ feet

   Depth: _____ feet

   Height: _____ feet

2. Is this a multi-unit building? Yes ____ No _____

   If yes, how many units will be affected? ____ units

3. Does the building contain residential units? Yes ____ No _____

   If yes, will the residential portion of the building be rehabilitated? Yes _____ No ___

4. Describe the scope of the work proposed for the Façade Improvement Program. Please be as specific as possible.

_____

_____

_____

_____

_____

_____

_____

_____

III. ADDITIONAL DOCUMENTATION

Submit Proof of Property Insurance.

Submit exterior photos depicting proposed area of work (2 minimum).

III. CERTIFICATION

The undersigned hereby certifies to the best of his/her knowledge that the information contained on this statement and any exhibits or attachments hereto are true and complete and accurately describe the proposed project, and the undersigned agrees to promptly inform the City of Ellsworth's Downtown Façade Improvement Advisory Committee of any changes in the proposed project which may occur.

Signature of Owner

Date

Print Name

Signature of Commercial Tenant (if Applicant)

Date

Print Name

*Social Security Number

*UEI #

*Tax ID Number

***To be provided only if project is awarded funds**

IV. COST AND TIME ESTIMATES

Please list and describe the proposed improvements to the exterior of your commercial/mixed-use property, provide material and/or labor cost estimates for each item, and the estimated date of completion.

* **Applicants should be aware that projects exceeding $75,000 will trigger the State ADA compliance rule.** Review the State of Maine §4594-G. Standards for facilities constructed or altered after March 15, 2012 for further details or consult with the City of Ellsworth Code Enforcement department.

Activity Description	Material Cost	Labor Cost	Completion Date
Totals:			