



N.I.F.T.Y. PROGRAM

Nappanee Improving Facades for Today and for Years to come

Application

Today's Date _____

Property Address _____

Name of Business at this Location _____

Contact(s) Name: _____

Title: _____

Scope of Renovation Project: You must meet with Architect Brad Sechrist and obtain detailed color plans ***before your submission*** of application will be accepted. **Also remember** to obtain signatures of both business and building owner, provide certification of taxes and provide cost estimates.

Total Cost of Project: \$ _____

Requested Grant: \$ _____

Estimated Additional Value of Building \$ _____

(Confidential: this value will be combined with other projects to assess total downtown improvements this year).

Reason for renovation:

Value of these improvements to the downtown:

Signature: Building Owner

Signature: Business Owner (If different from above)

N.I.F.T.Y. APPROVAL	
Signed by:	Title: Date:

Submit Application to Nappanee Community and Economic Development Office,
302 W. Market St. - Nappanee, IN 46550 or Fax: 574-773-4691