



APPLICATION

Pre-Development Grant Program

Updated for FY 2017-18

For Internal Use Only: Date Received _____

Please review the attached Guidelines & Requirements prior to completing this application.

PLEASE SELECT ALL GRANTS YOU ARE APPLYING FOR WITH THIS APPLICATION:

- DESIGN SERVICES GRANT
- LEVEL 1: MATCHING GRANT
- LEVEL 2: MATCHING GRANT

1. Applicant Information - Person authorized to sign grant application on behalf of applicant / entity.

Applicant Name: _____ Date: _____

Business Name: _____

Applicant Phone: _____ Applicant Email: _____

Applicant Mailing Address: _____

Business Address, if Different: _____

Contact Name, if Different than Applicant Name: _____

Contact Phone: _____ Contact Email: _____

Tax ID Number: _____

State of incorporation/organization documents filed? Oregon Other: _____

2. Project Information

Is the Property located within the Beaverton Urban Renewal District? Yes No

Is the Property located within the RC-OT, RC-TO, IND, or OI zones? Yes No

Property Address(es): _____

Property Tax Account Number(s): _____ Year(s) Building(s) Built: _____

Concept Proposed (select all that may apply): Significant Building Rehabilitation

Significant Redevelopment New Development of Significant Building(s)

Brief Description of Proposed Project (if known). If requesting a Level 2 Matching Grant, Please Describe Why Qualifies (Attach More Information, If Needed):

Please describe how the project concept could meet at least two of the following within the next five years: significantly increase employment, housing, site density and/or use of transit or alternative transportation (modes other than single occupant automobile use), provide mixed-use development, urban-form development and/or improve area aesthetics?

Current

If possible, estimate change in five years with project?

of current employees: _____

est. in five years if developed: _____

of current market rate housing units: _____

est. in five years if developed: _____

of current affordable housing units: _____

est. in five years if developed: _____

Square footage (SF) of current retail space: _____

SF est. in five years if developed: _____

Square footage (SF) of current office space: _____

SF est. in five years if developed: _____

Has this property received other public funding or grants in the past five years? Yes No

If yes, please describe: _____

Is this property currently church, non-profit or government owned? Yes No

3. Design / Feasibility (FOR MATCHING GRANTS ONLY)

What type of consultant(s) would you like to hire with this grant?

For the following, check all that apply:

Source(s) of matching funds: Bank/Credit Union Loan Friend/Family Loan Gift

Business Savings Personal Savings Grant Other _____

Do you have a consultant preferred for the project? Yes No

If Yes, please complete the following about the Architect or Consultant:

Business Name: _____ Contact: _____

Did this consultant provide a prior proposal for the project? Yes No *If Yes, please provide.*

Address: _____

Phone: _____ Email: _____

4. Property Owner - If applicant is not the Sole Property Owner, Owner Authorization Form is required with this application.

What is the Applicant’s ownership status in the property?

Sole Owner Joint Owner Applicant Has Property under Contract

5. Include copies of the following for this application to be complete:

- REQUIRED: Current (before) photos of the subject property**
- REQUIRED: Owner Authorization Form (If applicant is not the sole property owner)**
- REQUIRED (Matching Grant only): Applicant’s W-9**
- Any prior consultant proposals if you have a preferred consultant**
- Any prior work or bids such as plans, elevations, sketches, or engineering related to the proposed project**

6. STATEMENT OF UNDERSTANDING & CERTIFICATION BY APPLICANT

I, _____, (The Applicant) understand that the City of Beaverton must approve the proposed Pre-Development Grant scope of work. Certain changes or modifications may be required by the City of Beaverton prior to final approval.

Commitment of funds will not be processed before the City of Beaverton has received the necessary bids for the approved work. Any work started before a Commitment Letter is sent will not be eligible for reimbursement. Furthermore, any work that is more than the approved scope of work must be *pre-approved* by the City in order for the work to be eligible for reimbursement.

The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a Pre-Development grant and is true and complete to the best of the applicant’s knowledge. Verification of any of the information contained in this application may be obtained by the City of Beaverton from any available source.

If the applicant is not the sole owner of the property, the Owner Authorization Form must be completed and attached. The applicant is aware that a copy of the Beaverton Business License and W-9 for the applicant must be attached to this application for it to be complete.

Applicant Signature: _____ **Date:** _____

Applicant Printed Name: _____ **Title:** _____

PLEASE RETURN COMPLETED APPLICATION AND REQUIRED SUPPLEMENTAL DOCUMENTS TO:

Janiene Lambert, Senior Development Project Manager
Email: jlambert@BeavertonOregon.gov | Phone: (503) 526-2545
City of Beaverton, Community Development Department, PO Box 4755 Beaverton, OR 97076

Accessibility Information: This information can be made available in alternative formats such as large print or audio tape. To request alternative formats, please call 503-526-2493 or email cddmail@BeavertonOregon.gov and reference Pre-Development Grant.



OWNER AUTHORIZATION FORM

Pre-Development Grant Program

NOTE: This form is only required if the applicant is not the property owner

Property Information

List all property ownership interests:

If not sole owner, please attach proof of ability to sign on behalf of ownership entity.

Property Owner Contact Name: _____

Phone: _____ Email: _____

Property Tax Account Number: _____ Year Built (if applicable): _____

Has this property received other public funding or grants in the past five years? Yes No

If yes, please describe: _____

OWNER AUTHORIZATION

I, _____, am the owner of the property that is located at _____ in Beaverton, OR. I hereby give authorization for _____, who has site control through an option, purchase and sale agreement or other legal authority, to use the City of Beaverton's Pre-Development grant for this property.

Owner Signature: _____ Date: _____

Owner Printed Name: _____ Title: _____