

**MAIN STREET MOUNT JOY  
COMMERCIAL & RESIDENTIAL BUILDING IMPROVEMENT  
MATCHING GRANT APPLICATION**

Please complete the following application and attach all appropriate supporting materials to be considered for the Main Street Mount Joy Façade Improvement Grant. **Applications are due by the end of each month in order to be reviewed during the following month's MSMJ Design Committee Meeting.**

**Property Information:**

Property Address \_\_\_\_\_

Property is: \_\_\_\_\_ in the designated MSMJ district \_\_\_\_\_ adjacent/in close proximity to MSMJ area  
(See Yellow Highlighted Area)

Current uses of the property include: \_\_\_\_\_ Commercial (units \_\_\_\_\_) &/or \_\_\_\_\_ Residential (units \_\_\_\_\_)  
\_\_\_\_\_ Vacant \_\_\_\_\_ Other \_\_\_\_\_

Is this an owner occupied property: \_\_\_\_\_Y \_\_\_\_\_N

**Applicant:**

Name \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

Applicant is the: \_\_\_\_\_ Property Owner \_\_\_\_\_ Commercial Tenant \_\_\_\_\_ Residential Tenant

**If Applicant is not the Property Owner, please provide the following information:**

Property Owner Name \_\_\_\_\_

Address \_\_\_\_\_

Telephone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_

**Property Owner Agreement to Proposed Project**

I, the property owner of the business/property located at the address listed above, agree that the work as proposed may be completed if approved for a Commercial & Residential Building Improvement Matching Grant by the Main Street Mount Joy Design Committee. The property undergoing review at the address listed above is current with all State, County, School District, and Local Municipality taxes. I am also current on all applicable municipal utility bills (i.e. sewer, water, trash) related to this property.

\_\_\_\_\_  
Property Owner Signature

\_\_\_\_\_  
Date

**The purpose of the improvements are:** (check one)

\_\_\_\_\_ To Restore/Improve Property's Façade      \_\_\_\_\_ To Maintain Existing Quality/Appearance

*If checked Restore/Improve, please rank the level of visible change to the streetscape:*

\_\_\_\_\_ High Visibility      \_\_\_\_\_ Moderate Visibility      \_\_\_\_\_ Low/Same

**The Total Estimated Cost of your project:**

**Façade Work Only (eligible for grant):** \$ \_\_\_\_\_

*Total must only include eligible activities described in the MSMJ Façade Guidelines. Amounts must only include work to the Main Street facade. Corner properties, please refer to façade guidelines.*

**Summarize current conditions of property façade:**

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**Describe the scope of work of this application:**

(1) \_\_\_\_\_

\_\_\_\_\_

(2) \_\_\_\_\_

\_\_\_\_\_

(3) \_\_\_\_\_

\_\_\_\_\_

*Continue on a separate sheet of paper if more space is needed.*

**Applicant MUST provide the following documentation for the scope of work outlined above:**

- Photographs of current conditions (photos can be hard copy or digital) If digital, email to [mainstreetmountjoy@embarqmail.com](mailto:mainstreetmountjoy@embarqmail.com).
- Two (2) estimates/quotes from different contractors; Please indicate which contractor you will be using.
- Product samples, color swatches, drawings/renderings, etc. as required to clearly illustrate improvements under consideration.

**If you have questions on the application, contact the Main Street Mount Joy Manager at 717/653-4227. Please return the completed Grant Application along with all attachments to:**

Main Street Mount Joy  
15 Marietta Avenue  
Mount Joy, PA 17552