## **APPLICATION**

DUE: July 3, 2025 by 4:00 P.M.

**Directions:** Please complete all fields in the application below. Gather and provide all required supporting documentation and include those with the application form. Please complete a separate application form for each property you are requesting funding for. If you require additional space for any responses, please attach an additional sheet and identify the response according to the application question letters and numbers.

Completed applications can be dropped off at Village Hall (119 Park Ave, Medina, NY 14103) during business hours or e-mailed to Lauryn DaCosta at <a href="mailed:ldacosta@labellapc.com">ldacosta@labellapc.com</a>.

| Α. | Property Owner Information        |                  |            |                          |                          |        |  |  |
|----|-----------------------------------|------------------|------------|--------------------------|--------------------------|--------|--|--|
|    | Nan                               | ne of owr        | ner:       |                          |                          |        |  |  |
|    | Mail                              | ing addre        | 9SS:       |                          |                          |        |  |  |
|    | Telephone number:                 |                  | days:      | evenir                   | ngs:                     |        |  |  |
|    | E-m                               | ail:             |            |                          |                          |        |  |  |
| В. | Business and Property Information |                  |            |                          |                          |        |  |  |
|    | 1.                                | Addres           | s of prop  | erty:                    |                          |        |  |  |
|    | 2.                                |                  | of busines |                          |                          |        |  |  |
|    | Total # of 9<br>3. Building:      |                  |            | ommercial Units in       |                          |        |  |  |
|    | 4.                                | Total #          | of Reside  | ential Units in Building | :                        |        |  |  |
| C. | Finar                             | ncial Info       | ormatior   | 1                        |                          |        |  |  |
|    | 1.                                | Taxes/Insurances |            |                          |                          |        |  |  |
|    |                                   | a.<br>b.         | Are all p  | property, water and se   | ewer taxes paid to date? | Yes No |  |  |
|    |                                   |                  | If no, wh  | nich taxes are not curr  | ent?                     |        |  |  |
|    |                                   | b.               | Do you     | have property insurar    | nce?                     | Yes No |  |  |
|    |                                   |                  | If yes, is | it paid to date?         |                          | YesNo  |  |  |

## D. Proposed Improvements

| 1.      | What improvements do you wish to make to your building? List in order of priority, beginning with (1). Please note if the improvements are for commercial spaces or residential spaces. Attach an additional page if necessary.  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
|         |  |  |  |  |  |  |  |  |
| 2.      | Estimated Total Costs: \$  |  |  |  |  |  |  |  |
|         | 3. Please attach any additional information that will help the Village of Medina evaluate your project. Examples of possible additional information include sketches or renderings and cost estimates. <u>Note: Applications submitted with this information may be rated higher for readiness.</u>  |  |  |  |  |  |  |  |
|         | 4. Are any approvals required by the Village for the project, including planning or zoning approvals, to permit this project to move forward? Yes No Not Sure  |  |  |  |  |  |  |  |
| reimb   | SE ATTACH PROOF OF FINANCIAL SUPPORT FOR THE PROJECT (This is a cursement program and proof that the applicant can provide bridge financing for the project is needed as well as proof that they can supply 25% or more of a project match).  • Letter of Interest from a financial institution  • Letter from a bank indicating the applicant has sufficient resources to cover project costs |  |  |  |  |  |  |  |
|         | Commitment from other sources (i.e. other grants, etc.)  |  |  |  |  |  |  |  |
| Will yo | ou need support with securing financing for your project? Yes No Maybe   |  |  |  |  |  |  |  |

5.

| _    | _ ~    |        |              |
|------|--------|--------|--------------|
| _    | CANTI  | ICT OT | Interest     |
| L. ' | CUIIIL | ICL OI | II ILG I GSL |

(If there are any conflicts, they will need to be disclosed prior to receiving approval.)

|         | 1.   | Are you an official, employee, agent, consultant, or member of the board of the Village of Medina?  |
|---------|------|---|
|         |      | YesNo If yes, please describe your position:  |
|         | 2.   | Are you related by blood or marriage to any official, employee, agent, consultant or member of the board or agency of the Village of Medina?  |
|         |      | Yes No  If yes, please identify the official(s), agent(s), consultant(s), employee(s), or member(s) and describe the nature of your relationship:   |
|         |      |   |
|         | 3.   | Do you have any corporate, partnership, landlord-tenant-or other business relationship with any official, agent, consultant, employee, or member of the board of the Village of Medina?                         |
|         |      | Yes No If yes, identify the official(s), agent(s), consultant(s), employee(s) or member(s) and describe the business relationship:  |
|         |      |   |
|         | 4.   | Are you doing business in any of the following ways with any official, agent, consultant, employee, or member of the board of the Village of Medina (check any that are applicable, if other, please describe): |
|         | 5    | Purchaser or Seller of Goods - please describe:   |
|         | 7    | Loan or Grant Recipient - please describe:<br>Provision of Services - please describe:  |
|         |      | ) Other - please describe:  |
| before  | się  | view the certifications on the following page, which are part of this application, gning below. Compliance with the certifications and all other Small Project Fund es is required. All owners must sign.       |
| Signatu | ure  |   |
| Printed | l Na | ame Printed Name  |
| Date    |      | Date  |

### **Ownership**

I/We hereby certify that I/we own the property to be improved. If any changes in ownership should occur from this date forward, I/we agree to notify the Village of Medina immediately. Failure to do so may result in denial or termination of Small Project Fund participation.

### **Application Information**

To the best of my/our knowledge, all of the application information I/we have provided is true and correct. I/We understand that any willful misstatement of material fact will be grounds for disqualification. The Village of Medina is hereby granted permission to verify any of the information in the application in any appropriate manner.

#### **Taxes**

I/We understand that all taxes must be paid for the property to be improved with Small Project Fund resources and for all other properties in the Village of Medina owned wholly or in part by me/us. I/We understand that no Small Project Fund contracts will be signed unless all taxes and service charges are current.

#### **Contracts**

I/We understand that any contract for work paid for in part by the Small Project Fund will be between the contractor and myself/ourselves and I/we should **NOT SIGN ANY CONTRACT FOR WORK UNDER THIS PROGRAM UNTIL AUTHORIZED TO DO SO IN WRITING BY THE VILLAGE OF MEDINA.** I/We understand that the receipt of Small Project Fund assistance is subject to satisfactory completion of the approved work. I/We also understand that the Village of Medina is not responsible or liable for any breach of contract, faulty workmanship, accidents, liability or damage that may arise from my/our relationship with the contractor. I/We further understand that the Contractor cannot begin work on my/our property until a **WRITTEN NOTICE TO PROCEED** is issued to me/us and the Contractor by the Village of Medina. The written Notice to Proceed will be provided when all conditions are met and all necessary approvals received.

Competitive bids will be solicited for all of the Small Project Fund projects. I/we understand that if I/we choose a qualified contractor who is not the lowest bidder, the reimbursement will be based on the lowest bid.

#### **Reimbursement Program**

I/We understand the Small Project Fund program is a reimbursement program and that we will be reimbursed up to 75% of our project costs after the project is complete and paid in full as evidenced by paid invoices and cancelled checks.

### **Environmental Compliance**

I/We understand that before proceeding with the project New York State will require compliance with an Environmental Checklist including, but not limited to, NY State Historic Preservation Office (SHPO) approval, local zoning, site disturbance, lead based paint and asbestos.