



City of Salem

Facade Improvement Program - Application

Robert K. McCarthy
Acting Mayor

Tom Daniel, Director
Department of Planning &
Community Development

Thank you for your interest in the City of Salem Façade Improvement Program. Please

1. Complete the application form and Program Participant Data,
2. Sign the General Conditions, then
3. Return to the Department of Planning and Community Development along with **all** the Required Documents listed at the bottom of this form.

Applicant Information

Name: _____

Business Name: _____

Business Address: _____

Phone: _____ Email: _____ Tax ID/SSN: _____

UEI Number: _____ Don't have an UEI number? Click [here](#) to request one – you may continue the application process while you await your UEI.

How long have you been at this address? _____ If leasing, when does your lease expire? _____

Property Owner Information, if different from Applicant

Name: _____ Telephone Number: _____

If you are not the property owner, please have the owner or an authorized representative co-sign this application in the space indicated in the **General Conditions**.

Project Proposal

Describe the work you would like to implement using this funding: _____

Total Project Budget: \$ _____ Total Grant Request: \$ _____

Project Start Date: _____

Checklist of Required Documents

If you do not submit the following information your grant application will be considered incomplete and review of it will be delayed.

- ☐ Color photos of the existing condition of the site
- ☐ Scaled drawings of, and specifications for, the proposed improvements
- ☐ Estimated project budget
- ☐ Additional information regarding colors or products
- ☐ Signed General Conditions form



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Facade Improvement Program

General Conditions

1. I understand and agree that all work completed prior to receiving the commitment letter from the Department of Planning & Community Development is ineligible for funding.
2. I understand that I am responsible for all permitting for this project, including Building Permits or other required permits based on location (i.e. Conservation Commission, Historical Commission). Projects that are in the Urban Renewal Area must be formally reviewed by both the Salem Redevelopment Authority and the Design Review Board through its Small Project Review process. For grant-funded projects that include new signs, a sign application must be submitted, and design review is required for all signs regardless of business address.
3. I understand that all storefront improvements must adhere to the plans approved by the Design Review Board and/or Salem Redevelopment Authority. I further understand that unauthorized improvements will not be eligible for reimbursement.
4. I understand that all constructions costs exceeding \$2,000 will require the payment of prevailing wages as stated in the federal Davis-Bacon Act. I further understand and agree to inform my contractor that the Davis-Bacon documentation must be submitted with payment requests. I understand that if this documentation is not submitted, I will not be reimbursed for work completed.
5. I understand that to be eligible for this program I must be current with all city taxes and fees. I further understand and agree that I shall be solely responsible for all safety conditions and compliance with all safety regulations, building codes, ordinances, and other applicable regulations.
6. I understand and agree that I will not hold the City of Salem, and/or its agents, employees, officers and/or directors liable for any property damage, personal injury, or other loss related in any way to the Façade Improvement Program.
7. I agree to maintain sufficient insurance coverage for property damage and personal injury liability relating to the Façade Improvement Program.
8. I authorize the City of Salem to promote an approved project, including but not limited to, displaying a sign at the site during construction, and using photographs and descriptions of the project in City of Salem materials and press releases.
9. I understand that the City of Salem reserves the right to make changes in the conditions of the Façade Improvement Program as warranted.

Business Name: _____

Address: _____

Signature of Applicant: _____

Date: _____

Property Owner Authorization

If the applicant is not the property owner, please have the property owner, or an authorized representative, review the information submitted and sign below.

As owner of the property at _____ I agree to the above conditions and authorize the said business owner to make the stated exterior improvements to my property as part of the Façade Improvement Program.

Signature of Property Owner or Authorized Representative: _____

Date: _____