



Commercial Façade, Landscape, and Infrastructure Grant Program

Escambia County Community Redevelopment Agency (CRA)

This program provides up to a \$10,000 grant to be matched dollar-for-dollar by the property owner.

Program Intent

The intent of the Commercial Façade, Landscape, and Infrastructure Grant program is to provide funding to upgrade the appearance, property value, and economic activity mainly on commercial corridors within Escambia County’s designated redevelopment areas. The Infrastructure grant is available to property owners and/or business tenants whose property is located within a redevelopment area zoned R-6 or higher and is used for commercial or industrial purposes. Designated commercial corridors include:

<u>Barrancas Redevelopment Area</u>	<u>Brownsville Redevelopment Area</u>	<u>Englewood Redevelopment Area</u>
Barrancas Avenue	Border Street	Border Street
Bayou Chico – Waterfront	Fairfield Drive	“E” Street
Old Barrancas Avenue	Jackson Street	Fairfield Drive
Old Corry Field Road	Mobile Highway	Leonard Street
Weis Lane	New Warrington Road	Pace Boulevard
	Pace Boulevard	“T” Street
	“T” Street	“W” Street
	“W” Street	
<u>Palafox Redevelopment Area</u>	<u>Warrington Redevelopment Area</u>	
Beverly Parkway	Barrancas Avenue	
Fairfield Drive	Gulf Beach Highway	
Herman Street	Navy Boulevard	
Massachusetts Avenue	New Warrington Road	
Michigan Avenue	Old Corry Field Road	
Pace Boulevard	West Navy Boulevard	
Palafox (Highway 29)		
Texar Drive		

Program Eligibility

Grant funding of property improvements applies to the following:

- ❑ Location: Property must be located within a redevelopment area and zoned R-6 or higher and used for commercial or industrial purposes. Property cannot be exempt from ad valorem property tax.
- ❑ Guideline: Outstanding Solid Waste Management/Environmental Code Enforcement complaints or violations against the property will cause property to be ineligible.
- ❑ Ownership: Property owners must sign the grant program application and other related documents. Tenants may apply if a property owner is willing to sign.
- ❑ Multiple Properties: Owners of multiple properties may submit only one application at a time. Subsequent applications will be accepted only after completion of current project.
- ❑ Applications: Applications are accepted on a first-come, first-served basis. However, preference will be given to first-time applicants. Grant funding is based on availability.



Program Eligibility (cont'd)

- ❑ Design Review: Exterior and improvements must be approved by CRA staff and DRC staff for appropriateness. The applicant must meet with applicable County departments to determine required permits.
- ❑ Occupancy: Once the project has been completed, the property must be eligible to obtain, or already have a certificate of occupancy, and has received the final inspection from the appropriate agency.

Eligible Improvements

Typical **eligible** improvement items include:

- ADA Handicapped Access to a building
- Electrical Rewiring
- Exterior Lighting
- Exterior Painting
- Landscaping
- Parking Improvements
- Restoration of Architectural Features
- Sanitary Sewer Connection
- Screening/Fencing
- Sprinkler Systems

Ineligible Improvements

Examples of **ineligible** improvement items include:

- Interior modifications and/or rehabilitation
- Permitting fees
- Refinancing existing debt
- Non-fixed improvements (such as inventory and equipment)
- Owner performed labor (unless the owner is a duly licensed contractor)

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Owner Match:

- 50 Percent: Commercial Façade, Landscape, and Infrastructure Grant Program funding may not exceed 50% of the total cost of the improvements to each property or \$10,000; whichever is less. The property owner must expend one dollar on the project for every CRA dollar committed to the project. *(Example: \$20,000 total project cost = \$10,000 property owner contribution + \$10,000 CRA grant)*

Lien Requirement:

- Commercial Façade, Landscape, and Infrastructure Grant Program funds shall be secured by a lien against the applicant's property. The lien shall be forgiven one year after the date of dispersing funds. CRA will execute the necessary documents to acknowledge satisfaction of the lien provided the following activities are met:
 - Funded Improvements are not: altered, modified, removed, or demolished.
 - Property is not sold, transferred, or converted to 100% non-commercial use.
- If any of the above-referred activities occur within the lien period without receiving prior CRA approval, total grant funds will then become due and payable.

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221 Palafox Place * Pensacola, Florida 32502

(850) 595-3217

Commercial Façade, Landscape & Infrastructure Grant Process

1. Application submit complete grant application packet including the following:
 - Complete application form
 - Legal description of property
 - Proof of property ownership
 - Proof of property insurance
 - Certification of zoning and future land use
 - Scaled drawing of improvements involving building changes
 - Accurate color mock-ups and/or paint chips
 - Original color photographs of existing property conditions
 - Three cost estimates from qualified contractors (labor and materials for entire project). If the owner of the property is a licensed contractor and is qualified to do the work, then two additional cost estimates from qualified contractors will be required.
 - Final cost estimate including name of licensed contractor chosen to perform work
 - Copy of the chosen contractor's license
2. Grant committee meets to review the project for completeness and merit.
3. If the Grant Committee approves the project, CRA staff prepares the Funding Agreement and Lien document for the property owner's signature.
4. These documents are presented to the Board of County Commissioners (BCC) at the 2nd scheduled meeting of the month for approval.
5. After approval by the BCC, the property owner is provided with notification to proceed.
6. Upon project completion, signed off permit from Escambia County Building Inspections, receipt of the final invoice(s) from contractor(s), proof of payment (copy of cancelled check – front and back), inspection by CRA staff, and sign off by the property owner; the invoice(s) will be submitted to the County's Accounts Payable Department.
7. Accounts Payable will issue a check to the property owner for reimbursement of County portion of project cost.
8. After issuance of the reimbursement check, the Clerk of the Court will record the lien against the property in the amount of the County portion of project cost.
9. After one year of continued compliance with the program guidelines and from the date this lien agreement is recorded in the public records, this lien shall be forgiven.



APPLICATION TO: COMMUNITY REDEVELOPMENT AGENCY
COMMERCIAL FAÇADE GRANT PROGRAM
ESCAMBIA COUNTY
221 PALAFOX PLACE
PENSACOLA, FL 32502

DATE OF APPLICATION: _____

ADDRESS OF PROJECT:

APPLICATION IS HEREBY MADE FOR PROJECT AS DESCRIBED HEREIN:

LEGAL DESCRIPTION:

- ATTACH REQUIRED ADDITIONAL INFORMATION:
1. PROOF OF OWNERSHIP (E.G. DEED, ETC.)
 2. ANY ADDITIONAL INFORMATION REQUESTED BY THE CRA

NAME & MAILING ADDRESS OF OWNER/APPLICANT:
(PLEASE PRINT)

SIGNATURE(S) OF PROPERTY OWNER(S)

TELEPHONE # _____ FAX # _____

DATE _____

For office use only:

DATE & TIME APPLICATION RECEIVED: _____ RECEIPT NO. _____

ACCEPTED AS COMPLETE: _____ PLANS REVIEW: _____ APPROVED: _____
DATE INITIAL DATE



Keith Wilkins
Department Director

BOARD OF COUNTY COMMISSIONERS ESCAMBIA COUNTY, FLORIDA

COMMUNITY & ENVIRONMENT DEPARTMENT

221 Palafox Place
Pensacola, FL 32502
Phone: 850.595-3217
Fax: 850.595.3218
www.myescambia.com

Commercial Façade, Landscape, and Infrastructure Grant Program Memorandum of Understanding

I, the grantee, understand that work cannot commence on any portion of the Commercial Façade, Landscape and Infrastructure Grant Program project prior to receiving approval of the grant funds from the Escambia County Board of County Commissioners. Written notification to proceed will be provided to the grantee by the Community Redevelopment Agency (CRA).

Grantee Signature

Date

CRA Program Administrator

Date

Request for Taxpayer Identification Number and Certification

**Give form to the
 requester. Do not
 send to the IRS.**

Print or type See Specific Instructions on page 2	Name (as shown on your income tax return)	
	Business name, if different from above	
	Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
	<input type="checkbox"/> Exempt from backup withholding	
	Address (number, street, and apt. or suite no.)	Requester's name and address (optional)
	City, state, and ZIP code	
List account number(s) here (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Social security number								

or

Employer identification number								

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
3. I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here	Signature of U.S. person ▶	Date ▶
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Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
2. Certify that you are not subject to backup withholding, or
3. Claim exemption from backup withholding if you are a U.S. exempt payee.

In 3 above, if applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes, you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or
- Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax on any foreign partners' share of income from such business. Further, in certain cases where a Form W-9 has not been received, a partnership is required to presume that a partner is a foreign person, and pay the withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid withholding on your share of partnership income.

The person who gives Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States is in the following cases:

- The U.S. owner of a disregarded entity and not the entity,

VENDOR/PAYEE
TAXPAYER'S IDENTIFICATION NUMBER/ENTITY TYPE

The Internal Revenue Service (IRS) codes require us to have the Taxpayer's Identification Number on file for vendors/payees receiving payments after January 1, 1984. There are substantial IRS penalties if we do not comply. Furthermore, under Federal Income Tax Law, you are subject to certain penalties if you do not provide us with your correct Social Security Number (SSN) or Employer Identification Number (EIN). For assistance in determining proper name and number to report, refer to the IRS for W-9.

IMPORTANT: THIS COMPLETED FORM MUST BE RETURNED WITHIN 10 DAYS TO:

ESCAMBIA COUNTY CLERK OF CIRCUIT COURT
ACCOUNTS PAYABLE
221 PALAFOX PLACE SUITE 140
PENSACOLA, FL 32502

1. IF YOU ARE AN INDIVIDUAL OR NONCORPORATE COMPANY, PLEASE PRINT THE FOLLOWING INFORMATION:

Company/Individual's

Name _____

Address (for mailing payments)

Street/P.O. Box _____

City/State/Zip _____

Telephone _____ Fax _____

EIN/SSN _____

Authorized Signature/Title _____

Date _____

2. IF YOUR COMPANY IS INCORPORATED, PLEASE PRINT THE FOLLOWING INFORMATION:

_____ does operate in corporate form.
(Corporate Name)

Address (for mailing payments)

Street/P.O. Box _____

City/State/Zip _____

Telephone _____ Fax _____

EIN/SSN _____

Authorized Signature/Title _____

Date _____