

ROMEO Downtown Development Authority, Romeo, Michigan
Application Request for Funding for DDA SIGN Grant Program

Please Provide the Following Information:

Request No. 2017-001 Request Date: _____

Requested by (Business Name): _____

(Business Address): _____

Summary Facade Description: _____

Proposed Start Date: _____

Estimated Amount Requested: _____

Business Contact Name: _____

(Provide contact name of person responsible for business signage project, presenting the information and request to the ROMEO DDA Board.)

Address: _____

Daytime Phone: _____ Other Phone: _____

Fax Phone: _____ email: _____

Property Owner *if different than business owner*: _____

Property Owner contact information: phone:/email: _____

***Note: Refer to DDA SIGN Grant Program information and guidelines,
DDA CBD Model Design Guidelines for Facade.***

I, the applicant, have read and understand the SIGN Grant Program guidelines and hereby submit the application and required attachments to the Romeo DDA Office. _Sign/date_____

For Romeo DDA USE ONLY-Do Not Write Below this Line

Reviewed By: _____ Review Meeting Date: _____

FACADE Item\$: _____ Façade Improvement Account: _____

Approved: _____ Denied _____ (by Board Resolution or Motion)

_____ DDA Chairperson/DDA Treasurer

Notes: _____
