

## **WINFIELD MAIN STREET HISTORICAL PRESERVATION FACADE MINI-GRANT**

### **Grant Parameters**

1. Each recipient **must be a current member of the Winfield Area Chamber of Commerce**. A maximum of two (2) grants per building are possible in the life of this mini-grant program. Recipients may also be eligible for funds under other Winfield Main Street programs.
2. All buildings, except those that are stand-alone residents located within the downtown district as defined by Winfield Main Street's HyattPalma study, are eligible for funding. Stand-alone residents are buildings that are used as living space or homes that are not on-site with any business operation.
3. Applicants determine the total cost of each project. Mini-grants are awarded solely on the basis of actual material costs and professional labor costs, not on sweat equity. Funds are paid upon submission of receipts to the Winfield Main Street Revitalization office.
4. Mini-grant applications must be submitted to the Winfield Main Street Revitalization Design Committee and must include concept and color scheme. Winfield Main Street Revitalization Design Committee acts as the project review committee and projects submitted must meet design standards set by the committee. Each project must receive final approval from the Winfield Main Street Revitalization Board of Directors.
5. Upon signed approval of the mini-grant application, the recipient will have 90 days to complete the work. If for any reason the work cannot be completed within the time period, an extension must be requested from the Winfield Main Street Revitalization Design Committee. If no extension is obtained, the mini-grant will be void.

*It is the goal of Winfield Main Street to complement and enhance all building facades within the downtown district. Please call Sarah Werner, 620-221-2420, with questions.*

# WINFIELD MAIN STREET HISTORICAL PRESERVATION FAÇADE MINI-GRANT APPLICATION

*This application is for mini-grant(s) to accomplish the following work.  
Please check no more than three categories.*

- Windows
- Painting or cleaning
- Structural/tuck pointing
- Awnings/signage
- Architectural design

## APPLICANT MUST MEET THE FOLLOWING CRITERIA:

- Applicant must be a member of the Winfield Area Chamber of Commerce
- Applicant commits to complete work within 90 days of notification by the Design Committee.
- Owner(s) and tenant(s) of building are in agreement in regards to the project. Please attach a letter of agreement to this application.
- Party responsible for funding is in agreement with work to be done. Attach necessary documentation to this application.
- Project funding is in place.
- Applicant agrees to follow Design Committee recommendations, particularly color selections.
- Signed approval from the Design Committee must be received before the start of the project. A mini-grant will not be awarded for work already completed.
- Applicant must present documentation from the City of Winfield verifying that plans meet all code requirements. Please attach documentation to this application.
- Applicant will supply drawings of this project (if appropriate). Please attach drawings and color scheme to this application.

*(Please check each item to show that you understand and agree to these requirements.)*

## DOCUMENTATION:

Address of building for which mini-grant is applied: \_\_\_\_\_

### Building owner:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Day phone number \_\_\_\_\_

Reviewed by city: \_\_\_\_\_

### Building tenant, if different than owner:

Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Day phone number \_\_\_\_\_

Date \_\_\_\_\_

**PROJECT DESCRIPTION:**

Type of project planned: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Existing condition of building:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Summary/description of work planned for this grant only  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Estimated cost of this project (regarding the grant only) \_\_\_\_\_ (attach a copy of the estimate and color scheme proposed)

\_\_\_\_\_  
Applicant signature

\_\_\_\_\_  
Date



*Please Return this application to:*  
Winfield Main Street  
c/o Winfield Area Chamber of Commerce  
123 E. 9<sup>th</sup> Avenue  
P.O. Box 640  
Winfield, KS 67156  
ceo@winfieldpartners.org

Revised 1.18

Design Committee approval date \_\_\_\_\_

Required completion date: \_\_\_\_\_

