

**VILLAGE OF NORTH AURORA  
TAX INCREMENT FINANCING DISTRICT GRANT PROGRAM  
Application Form**

**1. Application information**

Date: \_\_\_\_\_

Loan Amount Requested: \$ \_\_\_\_\_ Total Project Cost: \$ \_\_\_\_\_

Name: \_\_\_\_\_

Home address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**2. Business information (the building or establishment for which the grant is sought)**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Applicant is: Owner \_\_\_\_\_ Tenant \_\_\_\_\_ If tenant, term of lease: \_\_\_\_\_

If tenant, name & phone of owner: \_\_\_\_\_

**3. Proposed use of program:**

\_\_\_\_\_ Canopy/awning

\_\_\_\_\_ Signage

\_\_\_\_\_ Windows/doors

\_\_\_\_\_ Exterior lighting

\_\_\_\_\_ Painting/tuck pointing

\_\_\_\_\_ Restoration of architectural feature

\_\_\_\_\_ Landscaping

\_\_\_\_\_ Exterior ADA accessibility

\_\_\_\_\_ Other (please specify) \_\_\_\_\_

#### 4. Breakdown of Project:

Estimated Amount	Description of Work
A. \$ _____	_____
B. \$ _____	_____
C. \$ _____	_____
D. \$ _____	_____

TO COMPLETE THIS APPLICATION, PLEASE ATTACH THE FOLLOWING INFORMATION TO FURTHER DESCRIBE THE PROPOSED PROJECT:

- Preliminary cost estimates (typically a copy of itemized contractor estimates/quotes).
- Site plan and elevation drawn to scale, with scale(s) noted, illustrating the proposed improvements. Proposed materials, colors, finishes and details, including signage (if any).
- Elevations of any façade proposed to be drawn to a scale of a least 1.8": 1'; each elevation drawing should include notations of proposed materials, colors, finishes, and details. The drawing should clearly show proposed signage (if any).
- Clear and identifiable photographs, at least 5"x7" in size, of the building facades and facades of buildings on the same block. If more than one façade is proposed for renovation, photographs of each façade and buildings on the same block should be submitted.

#### 5. Statement of Understanding:

- The applicant (undersigned) agrees to comply with the guidelines and procedures of the Village of North Aurora Tax Increment Financing District Grant Program and the conceptual design and outline specifications as agreed to by the applicant and the grantor.
- The applicant understands that the applicant must submit detail cost documentation, copies of building permits, bids contracts and invoices and contractor's final waivers of lien upon completion of the approved improvements.

Applicant's Signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

If the applicant is other than the owner, the following line must be completed:

I certify that I, the owner of the property at \_\_\_\_\_,  
do authorize the applicant to apply for a grant under the Village of North Aurora Tax  
Increment Financing District Grant Program and to undertake the approved  
improvements.

Lease beginning date: \_\_\_\_\_ Lease ending date: \_\_\_\_\_

Owner's signature\*: \_\_\_\_\_ Date: \_\_\_\_\_

\*By signing above, the applicant and owner agree to abide by all applicable laws, ordinances, and the rules and regulations of all authorities having jurisdiction over construction of the project shall apply to the contract throughout including the Illinois Prevailing Wage Act. The grantee or entity awarded funding will be required to submit certified payroll to the Village of North Aurora on a monthly basis for the work being performed under the grant and/or redevelopment agreement if said grant or redevelopment agreement funding is being used for the purchase of labor for the materials or services being rendered.

**Return completed application form to:**

**Scott Buening  
Community Development Director  
Village of North Aurora  
25 East State Street  
North Aurora, IL 60542**

**For Office Use Only**

Date application received: \_\_\_\_\_ Zoning: \_\_\_\_\_

Minimum of two cost estimates for each work item: Yes \_\_\_\_\_ No \_\_\_\_\_

Ineligible improvements, if any: \_\_\_\_\_

**Grant Approved** Date: \_\_\_\_\_

Total estimated project cost: \$ \_\_\_\_\_

Percent applied for grant: \_\_\_\_\_

Total amount of grant: \$ \_\_\_\_\_

**Grant Denied** Date: \_\_\_\_\_

Reason: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_