



# District Improvement Grants Program Application



## Instructions & Key Dates

Grant Cycle Deadline: **5 PM, February 15<sup>th</sup> (Spring Cycle), July 15<sup>th</sup> (Fall Cycle), and October 15<sup>th</sup> (Winter Cycle)**

Please email completed application to [seile@historicparkrose.com](mailto:seile@historicparkrose.com) or mail to 4048 NE 122nd Ave, PO BOX 20636, Portland, OR 97294. All applications must be received by the deadline for consideration. Grant projects must be able to be feasibly completed within one year of receiving funding. Business owners leasing space must submit authorization from the property owner as part of this application to be considered.

Historic Parkrose may request additional information during the review process if more detail is required. If awarded, grant funds will be released approximately 10 weeks after the deadline. Thank you for taking the time to apply, please contact us if you have any questions or need assistance completing the application.

**Note: All projects will require at least a 40% cash match from the grant recipient.**

**In other words, Historic Parkrose District Improvement Grants will only cover 40-60% of any funded project. The remaining funding must be secured from other sources. To receive the maximum match (60% of project costs) an applicant must submit three contractor bids for improvements to be made.**

### 1. Basic Information:

Name of applicant: \_\_\_\_\_

Age: \_\_\_\_\_ Gender: \_\_\_\_\_ Languages spoken: \_\_\_\_\_

Race/Ethnicity (optional, select all that apply):

American Indian or Alaska Native: \_\_\_ Asian: \_\_\_ Black or African American: \_\_\_ Native Hawaiian or Pacific Islander: \_\_\_ White/Caucasian: \_\_\_ Other: \_\_\_\_\_

Ethnicity: \_\_\_\_\_ Hispanic or Latino? \_\_\_\_\_ Other: \_\_\_\_\_

### 2. Business Information

Business name: \_\_\_\_\_

Business address: \_\_\_\_\_

Contact email: \_\_\_\_\_ Phone: \_\_\_\_\_

Type of business: \_\_\_\_\_ Year business founded: \_\_\_\_\_

Property Owner or Tenant?\* Property Owner: \_\_\_\_\_ Tenant: \_\_\_\_\_ Other: \_\_\_\_\_

Is business: women-owned: \_\_\_ minority-owned: \_\_\_ veteran-owned: \_\_\_ immigrant-owned: \_\_\_ Other: \_\_\_

If tenant, when does your current lease expires? \_\_\_\_\_

How long has the business been at the current location? \_\_\_\_\_

Estimated Annual Sales/Revenue: \_\_\_\_\_

Number of total employees/contractors: \_\_\_\_\_ Number of employees who are Parkrose residents: \_\_\_\_\_

Have you received a District Improvement Grant from Historic Parkrose in the past? Yes: \_\_\_\_\_ No: \_\_\_\_\_

***\*If you are not the property owner, the property owner or an authorized representative must co-sign this application in Section 4 below to be eligible for consideration.***





# District Improvement Grants Program Application



### 3. City of Portland Required Information/Affidavit:

#### General Conditions

- It is expressly understood and agreed that the applicant is not an agent, servant, employee, or sub-contractor of Historic Parkrose.
- It is expressly understood and agreed that the applicant shall be solely responsible for all safety conditions and compliance with all safety regulations, building codes, ordinances, and other applicable regulations.
- It is expressly understood and agreed that work completed prior to final approval is ineligible for funding.
- It is expressly understood and agreed that the applicant will not seek to hold Historic Parkrose, and/or its agents, employees, officers and/or directors liable for any property damage, personal injury, or other loss relating in any way to the District Improvement Grant Program.
- The applicant shall be responsible for maintaining valid and sufficient insurance coverage for property damage and personal injury liability relating to the District Improvement Grant Program.
- The applicant agrees to maintain the property and improvements, including, but not limited to, promptly removing graffiti and sweeping in front of the property.
- The applicant agrees to return a prorated amount of the grant money received if the improvement is removed within two years.
- The applicant authorizes Historic Parkrose and Portland Main Street to promote an approved project, including but not limited to displaying a sign at the site, during and after construction, and using photographs and descriptions of the project in Historic Parkrose’s materials and press releases.
- The applicant understands that Historic Parkrose reserves the right to make changes in conditions of the District Improvement Grant Program as warranted and subject to the availability of funding.

**Any person submitting an application for funding must truthfully complete this Affidavit and submit it with their Application. Questions apply to you as an applicant and any co-applicant(s) or co-owner(s). The applicant and all co-applicants must sign this Affidavit below.**

1. Do you or any of the co-applicants owe the City of Portland any monies for incurred real estate taxes, rents, or other indebtedness?  
 Yes     No    If yes, attach explanation.
2. Were you or any of the co-applicants ever the owners of any property that the City of Portland foreclosed for his/her failure to pay real estate taxes or other indebtedness?  
 Yes     No    If yes, attach explanation.
3. Have you or any of the co-applicants ever been convicted of any arson-related crimes, or are you currently under indictment for any such crime?  
 Yes     No    If yes, attach explanation.





# District Improvement Grants Program Application



4. Have you or any of the co-applicants ever been convicted of violating any law, code, statute or ordinance regarding conditions of human habitation within the last three years?

\_\_\_\_ Yes \_\_\_\_ No If yes, attach explanation.

5. Are you or any of the co-applicants and immediate family members\* currently employed or employed in the last 12 months by the City of Portland, Prosper Portland, or Historic Parkrose?

\_\_\_\_ Yes \_\_\_\_ No If yes, attach explanation. *\*Immediate family is defined as spouses/partners, parents, offspring, and siblings.*

If yes, employed in what capacity? Please include name of principal, name of agency or department, and position held in that agency or department.

6. Have you received any prior technical assistance or financial assistance from Prosper Portland or Historic Parkrose?

\_\_\_\_ Yes \_\_\_\_ No If yes, attach explanation.

*The undersigned hereby certifies, under the pains and penalties of perjury, that neither they, nor those with whom they have business ties, nor any immediate family member of the undersigned, is currently or has been within the past twelve months, an employee, agent, consultant, officer or elected or appointed official of the City of Portland, Prosper Portland or Historic Parkrose. (other than those explained above).*

Signed under the pains and penalties of perjury this date: \_\_\_\_\_

#### 4. Owner Attestation:

As owner of the property at \_\_\_\_\_, I have reviewed the above application and authorize operator of \_\_\_\_\_ at said address to perform the improvements described above as part of the Historic Parkrose District Improvement Grant Program.

Property owner name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Property owner signature: \_\_\_\_\_ Date: \_\_\_\_\_

#### 5. Project Description

##### I. Program Category: (choose all that apply)

- Building (windows/doors, façade, flooring, energy efficiency improvements, other interior renovations)
- Branding/Placemaking (signage, murals, other aesthetic improvement projects)
- Outdoor Improvements (green spaces, landscaping, permanent seating areas)
- Public Safety Improvements (lighting, cameras, alarm systems, fencing)

##### II. Basic Project Information

Brief description of business.

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# District Improvement Grants Program Application



Amount of funding requested and summary of project.

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Anticipated project start and completion date.

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### III. Budget Information

Budget summary— please provide a line-item summary of the specific itemized costs for which funding is requested. Please indicate the amount and source of other funds to be used to complete the project. (Personal savings, other grant loan, etc.)

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Bids— All applicants must submit at least one bid or quote for the project for which funding is requested. For each additional bid submitted (up to three), a higher percentage of project costs become eligible for funding:

- If the applicant submits one bid, Historic Parkrose is able to cover up to 40% of the project.
- If the applicant submits two bids, Historic Parkrose is able to cover up to 50% of the project.
- If the applicant submits three bids, Historic Parkrose is able to cover up to 60% of the project.

Bid Summary— Use the following tables to insert bid information quoted for each aspect of the proposed improvements.

Contractor Name	Bid Total	Bid Description	Is this vendor located within the Parkrose district?
<i>Example: ABC Contractors</i>	<i>\$12,345</i>	<i>For new lighting materials and installation</i>	<i>Yes</i>





# District Improvement Grants Program Application



## IV. Data Collection Questions

Historic Parkrose collects neighborhood level data to improve its program and advocacy for the district. Please answer the following so that the organization can learn more about your needs as a community member.

Do you live in the Parkrose district? Yes: \_\_\_\_ No: \_\_\_\_ Other:

\_\_\_\_\_

If so, for how many years?

\_\_\_\_\_

Do you volunteer in Historic Parkrose? \_\_\_\_\_

Select the ways in which you volunteer:

Sandy Cleanup: \_\_\_\_ Neighborhood Events: \_\_\_\_ Nonprofit board member: \_\_\_\_ Monetary or in-kind contributions: \_\_\_\_

Other: \_\_\_\_\_

Have you or your business participated in Historic Parkrose events such as Taste of Parkrose as a:

Vendor: \_\_\_\_ Sponsor: \_\_\_\_ Volunteer: \_\_\_\_ Event planning committee member: \_\_\_\_ Venue host: \_\_\_\_

Fundraiser: \_\_\_\_ Promoter: \_\_\_\_ Other: \_\_\_\_\_

Have you experienced the following at your business location?

Graffiti: \_\_\_\_ Break-ins: \_\_\_\_ Trash Can Damage: \_\_\_\_ RV Parking: \_\_\_\_ Camping/tents: \_\_\_\_ Abandoned Vehicles: \_\_\_\_ Shoplifting: \_\_\_\_ How often? \_\_\_\_\_

Other vandalism or crime: \_\_\_\_\_

Do you have any of the following safety measures implemented?

Security guard: \_\_\_\_ Security camera: \_\_\_\_ Motion detector: \_\_\_\_ Window lighting: \_\_\_\_ Barred windows:

\_\_\_\_ Dog: \_\_\_\_ Alarm system: \_\_\_\_ Parking lot chain/barrier/gate: \_\_\_\_ Business watch cooperation: \_\_\_\_\_

Other: \_\_\_\_\_

Approximately how much have you spent on safety improvements? \_\_\_\_\_

What resources would be most useful for your business?

Financial Advice: \_\_\_\_ Business technical support: \_\_\_\_ District Improvement Grants: \_\_\_\_ Marketing: \_\_\_\_

Networking: \_\_\_\_ Commercial property lease/sale/development: \_\_\_\_ Workforce Navigation: \_\_\_\_

Security improvements: \_\_\_\_ Crime prevention consulting: \_\_\_\_ Other: \_\_\_\_\_

## V. Additional Attachments

Please include photos, maps, and/or designs indicating the locations and appearance of proposed improvements.





# District Improvement Grants

## *Program Application*



### **VI. Project Narrative**

**Full description of proposed project stating the need for project, proposed solution, expected results.**

**(Max: one page)**





# District Improvement Grants

*Program Application*

