

# Charter Township Of Union

## Economic Development Authority Board Grant Application

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

Applicant(s): \_\_\_\_\_

Contact Name(s): \_\_\_\_\_

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

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

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

Daytime Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### Type of Proposed Project:

- Beautification** – to encourage landscaping and site beautification work on existing lots.  
(Up to 25% of the total with maximum potential award of \$2,000)
- Pedestrian Access Improvements** – to encourage installation of private sidewalks and barrier-free pedestrian access improvements from public sidewalks to existing buildings.  
(Up to 75% of the total with maximum potential award of \$3,000)
- Freestanding Signs** – to establish a more coordinated visual character for business signage and to maximize sign visibility in areas where mature street trees tend to obscure taller signs by supporting replacement of existing signs with monument-style ground signs.  
(Up to 50% of the total project costs, less the cost of any electronic message board component with maximum potential award of \$5,000)

### Anticipated Timeline of Improvements:

Start Date: \_\_\_\_\_ Completion Date: \_\_\_\_\_

**Description of Proposed Improvements: (attach separate sheet if necessary)**

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**\*Please attach supporting documents and concept plans\***

**Total Project Cost: \$** \_\_\_\_\_ **Requested Grant Funding: \$** \_\_\_\_\_

**Why is Approval of this Grant Application a Must?**

Please attach a letter to the EDA Board that answers the following questions and includes any additional information you would like to share with the EDA Board as part of this application:

- **Why is it a “must” for the EDA Board to approve a grant for these improvements?**
- **How are you planning to fund the remaining cost of the project?**
- **What impacts will these improvements have on your business, your customers, and other businesses in the area?**

I understand that my participation in the EDA Board Grant Program is contingent upon my full compliance with all requirements. I also certify that if I am a tenant of the subject property that I have obtained written approval from the property owner to complete the project improvements.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Owner (If different than applicant)

\_\_\_\_\_  
Date

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**For Office Use Only**

East DDA District

Approved Grant Amount: \$ \_\_\_\_\_

West DDA District

Date of Approval: \_\_\_\_\_

EDA Board meeting minutes attached

\_\_\_\_\_  
EDA Board Chair