



**DOWNTOWN REVOLVING LOAN FUND
COMMERCIAL REHABILITATION APPLICATION**

APPLICANT INFORMATION:

Name of Applicant: _____ Telephone #: _____

Mailing Address: _____ Building Address: _____

Are you the Owner Tenant Date: _____

BUILDING INFORMATION:

Number of stories: _____ Construction type: (brick, wood, etc.) _____

Describe the existing use on each floor: _____

Financing/Interest: Contract for Deed Mortgage Lessee Owned Clear

What are your plans for improvements/rehabilitation for the building:

Total Estimated Project Costs \$ _____

Amount you are requesting from the Downtown Revolving Loan Fund: \$ _____

BANKING INFORMATION:

Name of Bank: _____

Address: _____ City/State: _____

Telephone #: _____ Contact: _____

Please submit the following information with this application:

Copies of plans or drawings if available, bids or estimates of work to be completed and the most recent property tax statement.