**2021/2022 DHCD Community Legacy Grant**

**Capital Improvements Grant Application**

**Town of Snow Hill, MD**

**GRANT APPLICATION CHECKLIST –**

**REQUIRED ATTACHMENTS**

Applications will only be considered to be complete if ALL of the required documents listed below and in the Grant Application Guidance Document located at [www.SnowHillMD.gov](http://www.SnowHillMD.gov) are included in the application package. Incomplete applications will NOT be considered by the committee.

**One (1) original hard copy** (application and all required attachments) must be submitted to Town Hall or color-scanned and **emailed to the Grants Administrator** at [dburt@snowhillmd.com](mailto:dburt@snowhillmd.com).

Town of Snow Hill

103 Bank Street

Snow Hill, Maryland 21863

# The Application Must Include:

* Proof that the grant applicant owns the property they are proposing to rehabilitate.
  + - Business tenants who wish to apply for these rehabilitation funds must have written signed/notarized approval from the owner of the building.
* Photos and description of the current condition of the capital improvement, and a description, dimensions, drawings or depictions of what the proposed renovation will look like when completed, including materials used, and color. The purpose is to provide the Maryland Historic Trust with enough understanding of the project when complete in order to approve the project.
* Estimated costs of the work to be completed obtained from a qualified professional, licensed to perform work in the state of Maryland.
* If you are awarded a grant, and your property is located in the flood zone you will be required to provide evidence of flood zone insurance coverage on the property before the rehabilitation work begins.
* Signed “Certification of Grant Applicant” form located at the end of this document. Read all conditions in the **Grant Application Guidance Document** located on the Snow Hill town website carefully before signing.
* All applicants must be aware how Community Legacy funds are reimbursed – refer to the **Grant Application Guidance Document** for more information.
* Applicant must be current with all payments to the Town of Snow Hill, with regard to water/sewer and tax bills. Failure to do so will render an application for grant funds ineligible.

**Grant Application**

If the undersigned is awarded a Town of Snow Hill Capital Improvement Grant, they hereby certify that they will abide by the following conditions of the grant award:

# General Conditions

1. Applicants must be up to date on their water/ sewer bills in the Town of Snow Hill, and all real estate, and personal property taxes.
2. The Maryland Historical Trust (MHT) must review the project for its impact on historic structures, and, if required, approve the architectural plans and specifications for the project. No work may be initiated prior to approval of MHT and the Town Hall staff. Town Hall staff will seek this approval on behalf of the applicant.
3. Applicants must understand that this is a competitive funding process, and that submission of a grant application is NOT a guarantee of acceptance for funding. Grants will be awarded based upon the merits of the individual projects that are proposed and their adherence to the guidelines mentioned in the application paperwork.
4. Completed grant applications and all the required attachments must be received by the Town of Snow Hill as stipulated by the Town Hall. Once received, the applications will be reviewed by the Projects Review Committee.
5. 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. If required, a building permit must be obtained from the Code Enforcement Officer in Town Hall of Snow Hill.
6. All work initiated prior to final grant approval will be ineligible for funding.
7. It is expressly understood and agreed that the applicant will not seek to hold the Town of Snow Hill, its agents, employees, officers and/or directors liable for any property damage, personal injury, or other loss related in any way to the Town of Snow Hill.
8. The applicant shall be responsible for hiring and executing an agreement with a general contractor who is licensed to operate in the State of Maryland. Applicant shall ensure that said contractor provides insurance coverage for comprehensive public liability, property damage liability / builder’s risk, and workers’ compensation in the form and amounts required by the Town.
9. Applicant must certify that there are no hazardous materials located on the property, that it will not cause or allow any hazardous materials to be placed on the property, and that the property is in compliance with all applicable Federal and State environmental laws and regulations.
10. Upon completion of the project, all debris and construction materials are to be removed from the property and disposed of properly. The applicant agrees to maintain the property and improvements, including but not limited to promptly removing graffiti, sweeping and shoveling in front of the property, and otherwise complying with the Code of the Town of Snow Hill.
11. The applicant agrees to return a pro-rated amount of the grant money received if the improvements are ever removed within five years, while the property is under their ownership.
12. The applicant authorizes the Town of Snow Hill 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 their materials and press releases.
13. The Town of Snow Hill shall have the right to refuse reimbursement to the property/business owner if the Town believes the work is unsatisfactory or the improvements are not being completed according to the approved application.
14. The Town of Snow Hill will not pay more than the approved grant amount should the scope of work and/or cost increase due to unforeseen circumstances.
15. The Property/Business Owner shall provide evidence of payment(s) made to each contractor / vendor by providing a copy of the invoice and a copy of the cancelled check or other proof of payment for that invoice for each payment request to be reimbursed by the Town of Snow Hill.
16. The Town will only provide reimbursement upon completion and inspection of the project.
17. At the Project Review Committee’s discretion, exceptions to any of the guidelines may be approved due to special conditions or situations, as long as said exceptions do not conflict with any of the terms of the grant agreement between the Town of Snow Hill and DHCD.

I, the applicant, have read and understand the Town of Snow Hill - Community Legacy Rehabilitation Grants for Commercial & Residential Capital Improvements - Grant Application Guidance Document, and I agree to abide by the general conditions as set forth in this application and the guidance document.

Signature of Applicant: \_

Printed Name:

Address of Applicant:

Date:

Phone #:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

# Project Description

Name of business (if applicable) to be rehabilitated (N/A otherwise): \_

Address of Property to be rehabilitated:

Provide a detailed description of your project (add additional pages if needed):

Will use of the property change following completion of this project? Yes □ No □

If yes, please explain:

Date to begin the project:

Anticipated end of the project:

Total amount of the project (include contractor’s estimate(s)):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Total amount of this request (see Grant Application Guidance Document for guidance):

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Attach pictures and/or drawings and/or descriptions of the project in sufficient detail to demonstrate need of project, and to indicate finished product appearance and materials for Maryland Historic Trust approval purposes.

Signature of Building Owner (if different from Applicant) consenting to work to be performed on the project property (mark “N/A” if not applicable):

Signature of Building Owner:

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Printed Name:

Address of Owner:

Date: