

Storefront Improvement Program Application

City of Philadelphia, Department of Commerce



PART 1 - APPLICANT INFORMATION

Address of Property Being Improved _____ ZIP Code _____

Commercial Corridor (see Program Guidelines for eligible corridors) _____

Applicant Name (person or company applying for rebate) _____

Applicant's Mailing Address (if different than above) _____ ZIP Code _____

Applicant Business Privilege Tax # _____ EIN or SSN# _____

Contact Person & Title _____

Contact Phone Number _____ Fax Number _____ Email _____

Name of Business in Property Being Improved _____

Type of Business _____ Number of Employees _____

Legal Name of Property Owner _____

NOTE: Applicants must NOT commence work until written approval from the City is received.

PART 2 – STOREFRONT IMPROVEMENT PROPOSAL

Describe the improvements you plan to make to your storefront:

Describe any other building improvements you will be making (if applicable):

PART 3 – STOREFRONT IMPROVEMENT COSTS

Use this form to itemize costs of the improvements planned for your storefront. Insert the material & labor costs of each improvement as estimated by your selected contractor(s). You must also attach the estimates from your selected contractor(s) and the estimates from at least one additional contractor for each improvement type proposed below.

PRE-DEVELOPMENT COSTS –these costs are eligible for up to 100% re-imbusement

Service	Costs	Your Selected Contractor/Vendor
Design/ architecture services	\$	
Permits and associated fees	\$	
SUBTOTAL	\$	

CONSTRUCTION COSTS –these costs are eligible for up to 50% re-imbusement

Improvement Type	Off-Site Costs (materials, fabrication)	On-Site Labor Costs (installation, construction)	Total Costs	Your Selected Contractor/Vendor
Façade masonry	\$	\$	\$	
Brick pointing	\$	\$	\$	
Cornices	\$	\$	\$	
Exterior Painting	\$	\$	\$	
Windows/ glazing	\$	\$	\$	
Exterior doors	\$	\$	\$	
Exterior façade lighting	\$	\$	\$	
See-through security gates	\$	\$	\$	
Signage	\$	\$	\$	
Canopies/awnings	\$	\$	\$	
Handicapped ramps	\$	\$	\$	
Window boxes	\$	\$	\$	
Security Equipment (alarm systems, camera systems)	\$	\$	\$	
Other: _____	\$	\$	\$	
SUBTOTAL	\$	\$	\$	

TOTAL COSTS FOR STOREFRONT IMPROVEMENTS (Pre-development + Construction) \$ _____

PART 4 – APPLICATION ATTACHMENTS

CHECKLIST -Please attach the following:

Color digital photographs of your building sent via email clearly showing the following:

- 1. Areas that will be improved;
- 2. The entire front facade of your building; and
- 3. The views down the block to the right and left of your building of your building.

An illustration of the work you would like to do. Any of the following are acceptable:

- ✓ A hand drawn sketch of the front of your building (does not have to be to scale)
- ✓ a printed-out digital picture with written notes
- ✓ a photo with post-it notes attached
- ✓ an architect’s rendering
- ✓ NOTE: if your project includes signs or awnings, please ask your contractor to prepare a picture of the new sign or awning showing all dimensions, materials, colors, and lettering.

Contractor estimates detailing on-site labor/installation costs and offsite material and fabrication costs. Two estimates are required. We recommend you secure at least three. All applicants must seek proposals from businesses owned and controlled by minority persons (MBEs), women (WBEs) or disabled persons (DSBEs) as described above and in the program guidelines.

Letter from building owner (if different from applicant) granting permission for the proposed work.

PART 5 – CERTIFICATION FOR COMPLIANCE WITH FEDERAL, STATE & LOCAL REQUIREMENTS

I certify that:

- 1. The information contained here is accurate.
- 2. The business and property owner(s) are current with all City obligations, including but not limited to taxes, licenses, water revenue billings etc, as well as any assessments due to Business/Neighborhood Improvement Districts or Special Services Districts. All permits, licenses, environmental and historical requirements associated with the above work will be complied with.
- 3. I have read and will comply with the requirements outlined in the Storefront Improvement Program Guidelines.
- 4. I understand that Federal Prevailing Wage Rate Requirements may apply to this project (I will be notified in advance by the City if they do) and I agree to work with the City Labor Standards Compliance officer in implementing those wage rates, when applicable, with the contractors I have selected. The Philadelphia Department of Commerce is not liable for any legal actions due to the neglect of such compliance.
- 5. I certify to make “best and good faith efforts” to include businesses owned and controlled by minority persons (MBEs), women (WBEs) and disabled persons (DSBEs) in the project. Potential M/W/DSBE project participants can be found in the City of Philadelphia’s Office of Economic Opportunity Directory of Certified Firms (Contact OEO at 215-686-6232 or review the online directory at <http://www.phila.gov/mbec/directory.asp>) or the Pennsylvania Unified Certification Program’s Directory of Disadvantaged Business Enterprises (<http://www.paucp.com>).

APPLICANT OR DESIGNATED REPRESENTATIVE

Name _____ Title _____

Signature _____ Date _____

Corridor Relationship Manager Name _____
Organization _____

**Submit your completed application to your Relationship Manager, or e-mail to ana.fuentes@phila.gov,
or mail to Phila Commerce Dept, 1515 Arch St, 12th Fl, Phila, PA 19102.
You will receive a notification by e-mail when your applicaiton is received.**