



# FACADE GRANT APPLICATION

145 Fifth Avenue E. ~ Hendersonville, NC ~ 28792  
Phone (828) 233-3216 ~ Fax (828) 697-6185  
www.cityofhendersonville.org  
DOWNTOWN HENDERSONVILLE

The following are required to constitute a complete application:

- ~ This form including the property owner's signature.
- ~ Attachments such as sketches, photos, site plan, etc., necessary to clearly explain the project.
- ~ Copies of a cost estimate for labor and materials.

Date

Address of Property

Property Owner: Name

Address

Phone

Applicant Name (if other than owner)

Address

Phone

Anticipated Project Cost (evidence is required);

Anticipated Project Start Date:

Anticipated Project Completion Date:

Details of proposed work: (attach additional papers if needed).

I, the undersigned, understand the Facade Grant must be used in the manner described in this application and the application must be reviewed by the Hendersonville Historic Preservation Commission or Downtown Economic Director prior to commencement of work. I understand that failure to comply with the approved application may result in the forfeiture of grant funds.

Owner's Signature \_\_\_\_\_

Applicant's Signature \_\_\_\_\_

Official Use:  
DATE RECEIVED: \_\_\_\_\_ BY \_\_\_\_\_