

**CITY OF IRONTON – EMPOWERMENT ZONE  
BUSINESS EXTERIOR IMPROVEMENT PROGRAM (BEIP)  
APPLICATION**

Received by: \_\_\_\_\_

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

Application Fee: \_\_\_\_\_

**(For Office Use Only)**

**1. Project Location and Description**

Address of Property to be improved: \_\_\_\_\_

Auditor Parcel Number(s): \_\_\_\_\_

Date Structure Built: \_\_\_\_\_

Name of Business(es) in Project: \_\_\_\_\_

Building Street Frontage Measurement of Project: \_\_\_\_\_

Building Stories: \_\_\_\_\_

Qualifying Historic Property (National Historic Register): \_\_\_\_\_

**2. Applicant Information**

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

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

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

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

Do you Own, Rent or Lease the subject property? \_\_\_\_\_

**3. Building Owner**

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

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

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

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

**4. Businesses or Services Offered on Site: \_\_\_\_\_**

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



**8. Estimated Costs and Timing**

Please provide copies of vendor bids/estimates or other documentation of cost estimates for all proposed façade work. **Applications lacking sufficient cost estimates will NOT be reviewed.**

- a. Clean exterior \$ \_\_\_\_\_
- b. Exterior prep and paint \$ \_\_\_\_\_
- c. Window replacements/repair \$ \_\_\_\_\_
- d. Masonry repair & repainting \$ \_\_\_\_\_
- e. Door replacement/Entry Foyer Repairs \$ \_\_\_\_\_
- f. Exterior Lighting \$ \_\_\_\_\_
- g. Façade restoration/rehabilitation \$ \_\_\_\_\_
- h. Architectural/Design Fees \$ \_\_\_\_\_
- i. Environmental testing/abatement \$ \_\_\_\_\_
- j. Building Permit/Planning Fees \$ \_\_\_\_\_
- k. Other Proposed Improvements (specify) \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**Subtotal** \$ \_\_\_\_\_

- l. Signage \$ \_\_\_\_\_
- m. Awnings \$ \_\_\_\_\_

**Subtotal** \$ \_\_\_\_\_

**TOTAL ESTIMATED COST** \$ \_\_\_\_\_

**Estimated Days/Months for Completion** \_\_\_\_\_

**9. Sources of Funds for Project**

Please provide proposed sources of funds for the project.

**Grant:**

Business Exterior Improvement Program \$ \_\_\_\_\_

**Grant Subtotal** \$ \_\_\_\_\_

(Grant amounts may not exceed Grant Criteria and require at least a 1/1 match)

**Match:**

a. Bank Financing \$ \_\_\_\_\_

b. Owners Cash Equity \$ \_\_\_\_\_

c. Other: \_\_\_\_\_ \$ \_\_\_\_\_

**Match Subtotal** \$ \_\_\_\_\_

**TOTAL SOURCES OF FUNDS FOR PROJECT** \$ \_\_\_\_\_

**10. Signatures**

\_\_\_\_\_  
Property Owner(s) Signature(s)

\_\_\_\_\_  
Applicant(s) Signature(s)

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

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

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***APPROVAL (for office use only)***

Amount Approved: \_\_\_\_\_

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

Approved by: \_\_\_\_\_

Chairperson  
City of Ironton Design Review Board

Approved by: \_\_\_\_\_

Executive Director  
Huntington-Ironton Empowerment Zone