

City of Monticello/Monticello Main Street, Inc.
FACADE IMPROVEMENT MATCHING GRANT PROGRAM
APPLICATION

Application Date: _____

1. Applicant/Co-Applicant

2. Owner of Business _____
3. Business Name and Address _____

4. Phone: _____
5. Estimated cost of project: \$ _____

Paint	_____
Signage	_____
Repair or replacement of windows	_____
Masonry repairs	_____
Awnings	_____
Other _____	_____
6. Items needed to process this application:
 - a. Current photograph of property to be improved.
 - b. Drawings of proposed improvements.
 - c. Written description of proposed improvements, including materials and colors.

Applicant(s) Signature(s)

