

DESCRIPTION OF REHABILITATION

Feature A

NAME OF ARCHITECTURAL
FEATURE: _____
Describe feature and its condition:

Describe proposed work on feature:

Feature B

NAME OF ARCHITECTURAL
FEATURE: _____
Describe feature and its condition:

Describe proposed work on feature:

Feature C

NAME OF ARCHITECTURAL
FEATURE: _____

Describe feature and its condition:

Describe proposed work on feature:

DESCRIPTION OF REHABILITATION (continued)

Feature D	
<p>NAME OF ARCHITECTURAL FEATURE: _____ Describe feature and its condition:</p>	<p>Describe proposed work on feature:</p>
Feature E	
<p>NAME OF ARCHITECTURAL FEATURE: _____ Describe feature and its condition:</p>	<p>Describe proposed work on feature:</p>

Feature F

NAME OF ARCHITECTURAL
FEATURE: _____

Describe feature and its condition:

Describe proposed work on feature:

Please photocopy this sheet and attach copies if necessary.

5 COST ESTIMATE OF PROPOSED WORK

*Please provide a budget that includes accurate estimated costs of your project. Include an **itemized breakdown** of work to be funded by the incentives and the work to be funded by the applicant. Include only eligible work elements. Use additional sheets as necessary. **(Please reference this section in your contractor's bid attachment).***

Type of Incentive GRANT LOAN

Feature	Work to be Funded	Grant Request	Cash Match (and or loan)	Total
A.		\$	\$	\$
B.		\$	\$	\$
C.		\$	\$	\$
D.		\$	\$	\$
E.		\$	\$	\$
F.		\$	\$	\$
G.		\$	\$	\$
H.		\$	\$	\$
I.		\$	\$	\$
J.		\$	\$	\$
K.		\$	\$	\$
	Total Proposed Work	\$	\$	\$

<p>For loan requests indicate total loan request here</p>	<p>\$</p>
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If partial incentive funding were awarded, would you complete your project?

YES

NO

ADDITIONAL MATERIALS REQUIRED

The following items must be submitted along with this application

- One set of photographs or slides for each feature as described in Item 4 "Description of Rehabilitation". Please label of each photograph with the address of your property and the feature number.
- A construction bid for your project.
- Scaled drawings, spec sheets, and materials of the proposed work if applicable to your project.
- Other information as required by staff.

ASSURANCES

The Applicant hereby agrees and acknowledges that:

- A. Funds received as a result of this application will be expended solely on described projects, and must be completed within established timelines.
- B. Awards from the Historic Preservation Fund may differ in type and amount from those requested on an application.
- C. Recipients must submit their project for any required design review by the Historic Preservation Commission and acquire any required building permits before work has started.
- D. All work approved for grant funding must be completed even if only partially funded through this incentives program.
- E. Unless the conditions of approval otherwise provide, disbursement of grant or rebate funds will occur after completion of the project.
- F. The incentive funds may be considered taxable income and Applicant should consult a tax professional if he or she has questions.
- G. If this has not already occurred, Applicant will submit an application to landmark the property to the Historic Preservation Commission. If landmarking is not possible for whatever reason, Applicant will enter into a preservation easement agreement with the City of Louisville. Any destruction or obscuring of the visibility of projects funded by this grant program may result in the City seeking reimbursement.
- H. The Historic Preservation Fund was approved by the voters and City Council of Louisville for the purpose of retaining the city's historic character, so all work completed with these funds should remain visible to the public.

Signature of Applicant/Owner

Date