

**City of Rancho Palos Verdes
Western Avenue
Storefront Improvement Program
Program Application FY25-26**



Section 1: Applicant Information

Name: _____

Check all that apply: Property Owner Business Owner/Tenant

Business Name: _____

Property Address: _____

Mailing Address: _____

Assessor's Parcel No.: _____ Street Frontage: _____ LF (lineal feet)

Daytime Phone Number: _____ Email: _____

Total Number of Businesses in Building: _____

Name(s) of Other Businesses: _____

Section 2: Property Owner Information (complete if tenant is applicant)

Property Owner Name: _____

Property Owner Mailing Address: _____

Property Owner Daytime Phone Number: _____

As the legal owner of the above property, I hereby grant authorization to complete the storefront improvements indicated on this application.

Signature: _____ Date: _____

Section 3: Funding Request

Grant (please choose only one option):

Tier 1: Mini Grant

(50% of project cost up to a maximum of \$5,000 in grant funds)

Tier 2: Significant Storefront Improvement Grant

(50% of project cost up to a maximum of \$10,000 in grant funds)

Tier 3: Multiple Tenant Commercial Grant

(50% of project cost up to a maximum of \$20,000 in grant funds)

Grant Amount Requested: \$_____

Estimated Total Project Cost: \$_____

I will be using a portion of approved grant funds for Architectural/Design services
(up to \$1,000 of approved grant funding)

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Section 4: Scope of Work

Description of Proposed Improvements (attach additional pages if needed):

Section 5: Checklist

Required Attachments:

- Copy of Business License
- Contractor Bids/Estimates (minimum of 3)
- Photos of Current Storefront (minimum of 3, depicting areas for proposed improvements)
- Designs/samples of proposed improvements (e.g. color swatch for new paint, design of new signage/awnings, etc.)
- Site Plans (for Tier 2 and Tier 3 applicants)
- Exterior Elevations (for Tier 2 and Tier 3 applicants)

Section 6: Acknowledgment

We certify that the owner is the property owner of record.

I have read and understand the Program Guidelines and accept them.

I certify that I am qualified and will abide by such conditions set forth in this application and all reasonable conditions which may be issued by the City of Rancho Palos Verdes in the implementation of this project including the obligation to maintain the improvements for a minimum of 3 years.

Property Owner(s) Signature:

Business Owner(s) Signature:

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