



**My Downtown Beautification Micro Grant**

**Applicant Information**

Full Name: \_\_\_\_\_ Date: \_\_\_\_\_  
*Last First*

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

Address: \_\_\_\_\_  
*Street Address Apartment/Unit #*

\_\_\_\_\_  
*City State Postal Code*

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

**Project Information**

**Eligible Funding Components**

Description	Estimated Material/Project Costs
<b>Total Funding Request</b>	<b>\$</b>

**Non-Eligible Funding Components and/or Labour**

Description	Estimated Material/Project Costs

**Required Documentation**

	Photos of existing building storefront (before project)
	Photos/drawings of renderings of proposed components
	Quotes for all proposed components

**TERMS & CONDITIONS**

I \_\_\_\_\_ of \_\_\_\_\_

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have read the complete application and concur with and give my consent to the work proposed in the application.

I will display signage provided by the Sechelt Downtown Business Association to promote the Beautification Micro Grant Program on the exterior of the building for a mutually agreeable period not to exceed three months after completion of project.

I agree not to involve Downtown Sechelt in any legal action between myself and any contractors, estimators, employees, workers or agents arising from or out of this beautification project.

Payment of approved grants will be made upon the applicant providing proof of completion of the proposed improvements along with verification of expenditures. Please scan and email the application or mail application to PO Box 442 Sechelt.

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Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

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Signature \_\_\_\_\_ Print Name \_\_\_\_\_ Date \_\_\_\_\_

Contact:  
 Theresa Logan  
 Executive Director  
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 604-885-9611