

Planning & Zoning Department 7275 W. Main Street Kalamazoo, MI 49009 Phone: 269.216.5223

planning@oshtemo.org

DOWNTOWN DEVELOPMENT AUTHORITY GRANT PROGRAM APPLICATION

1. Applicant Information

Business Name (If App	Business Name (If Applicable):	
City, State:	Zip Code:	
City, State:	Zip Code:	
Applicant Phone:		
<u>'</u>		
quested:		
	5	
Amount Requested (N	of to Exceed \$5,000):	
ents document for complete	e details.	
n from owner (if applicant is n	ot the property owner or	
roject plans (scope of work, ir	ncluding materials, sample	
proposed façade, security can	nera specifications), which	
with the guidelines.		
e costs supported by a quote	from at least one and up to	
	•	
	ect.	
	City, State:	



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4. Acceptance and Signature

By signing below and submitting this application, I, the undersigned applicant, affirm that to the best of my knowledge the information provided on this application is accurate and complete; that I have read and understand the terms and conditions of the Program; and that there are no delinquent accounts with Oshtemo Charter Township and/or the Oshtemo DDA.

Applicant Signature	Date of Signing	
Owner Signature	Date of Signing	