Business RenovationGRANT PROGRAM APPLICATION

SECTION 1: General	ral Information	
Business Na	ame:	
Business Ad	ddress:	
Contact Pers	son:	
Phone:	Email:	
Website:	Social Media:	
Y / N	Business is located within Downtown Clearwate	er CRA
Y / N	Boundaries Previous CRA Grant Awardee	
	Attach City of Clearwater Business Tax Receip	t (BTR)
SECTION 2: Proper	rty Owner Information	
Name:		
Address:		
Phone:	Email:	
Property Leg	gal Description:	
☐ Att	ttach Copy of Lease	
SECTION 3: Proje	ect Information – Tell Us About Your Business Ne	ed (s)
Project Type (d	check all that apply): Exterior Interior	Structural Other
Description:		
	Attach 2 (two) price estimates per item	Attach pictures of proposed work
Estimated Total Pr	Project Cost: \$ Requested Gr	rant Amount: \$
	eline: (Start Date) to	
	ure:	



City of Clearwater Community Redevelopment Agency (CRA) 600 Cleveland Street, 6th Floor | Clearwater, Florida 33755

Revision Date: 9/29/2023