

Tillamook Urban Renewal Agency
Private Project Application

Date of Submission _____

1) Applicant:

Name: _____

Mailing Address: _____

Phone: _____ Cell Phone: _____

Email address: _____

2) Business or Property Needing Improvement:

Business Name or Description: _____

Property Address: _____

Owner's Name: _____

Owner's Address _____

Owner or Business Phone: _____

3) Brief Description of Renovation Project, including estimated completion date:

Please complete the Project Budget below:

Expenses	Amount
Permits	
Architect	
Materials	
Labor	
Other Project Expense	
Other Project Expense	
Total Expense	

Project Funding Sources	Amount
Amount of TURA Loan Request	
Amount of TURA Grant Request	
Owner Contribution	
Other Source of Funds	
Other Source of Funds	
Total Cost of Project	

Where did your estimated costs come from? _____

4) If applicant is not the owner of the subject property, does applicant:

Rent or Lease _____ Lease Expires _____

5) To be included with application

- ___ Evidence of Ownership
- ___ Property Owner Consent Form
- ___ Plot Plan
- ___ Preliminary Design Drawings (rough design showing approximate improvements)
- ___ Cost Estimates from Licensed Contractors
- ___ Copy of Lease (if applicable)
- ___ Grant Approval Agreement and Receipt of Funding
- ___ City and/or County Permits (upon request)

6) Certification by Applicant

The applicant certifies that all information in this application, and all information furnished in support of this application, is true and complete to the best of the applicant's knowledge and that all required permits have been obtained.

If the applicant is not the owner of the property to be renovated, or if the applicable business is a partnership corporation, etc. rather than an individual, the applicant certifies that he/she has the authority to sign and enter into an agreement to perform the renovation work on the property.

Applicant's Signature

Date

Applicant's Signature

Date

Return Completed Application to: Tillamook Urban Renewal Agency
 210 Laurel Avenue
 Tillamook, OR 97141



Tillamook Urban Renewal Agency ~ 210 Laurel Avenue ~ Tillamook, Oregon 97141
~ Phone: 503-842-2472 or 503-374-1830 ~ Fax: 503-842-3445

Property Owner Consent Form:

I, _____ (“Property Owner”), certify that I own the property located at _____ (“Address”) in Tillamook, Oregon and that I have reviewed the application by _____ (“Applicant”) for participation in one of the Tillamook Urban Renewal Agency’s Assistance Programs. I understand that the proposal includes the following changes and/or enhancements to my building:

I fully support this application and further certify that the Applicant holds a valid lease for _____ months, expiring on _____.

Signature of Property Owner

Date

Printed Name of Property Owner

Mailing Address of Property Owner

Telephone Number of Property Owner

Return to:
Tillamook Urban Renewal Agency
210 Laurel Avenue
Tillamook, OR 97141
503-842-2472

Approval Agreement and Receipt of Funding

Applicant's Name: _____

In consideration of the receipt of funding from TURA:

1. I understand that monies shall not be distributed until all proposed work is completed and inspected.
2. I understand that an inspection of the project must be performed by TURA Contract Committee upon completion of the project.
3. **I agree to follow the plan submitted with the application. I understand that any and all changes to the approved plan must be approved by the TURA board and that failure to do so may annul the project funding agreement.**
4. If attached, I understand and agree to "Conditions of Approval" as developed by the TURA Board.
5. I agree to complete all improvements within one year of approval from the TURA Board. Any time extension must be filed and approved the TURA Board.
6. I waive and relinquish all claims, demands, and liabilities, past, present or future, of any nature against all officers, directors, members, agents and employees of TURA ("Indemnified Persons") arising from, related to or connected with the Grant or Loan and agree to indemnify and hold harmless each Indemnified Person from and against all claims, demands, and liabilities arising from, related to or connected with the Grant or Loan or the use, occupation, or implementation of the project.

Applicant Signature _____ **Date** _____

I acknowledge receipt of Grant or Loan funding in full.

Applicant Signature _____ **Date** _____

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