



SOUTH HISTORIC DISTRICT
PALATKA, FLORIDA

Received _____
Grant # _____
Committee Approval _____

Palatka South TIFF District Commercial Rehabilitation Grant Application

Applicant Name: _____

Mailing Address: _____

Business Name: _____

Property Owner: _____

Property Address: _____

Contact Person: _____

Applicants Phone Number: _____ **E-Mail Address:** _____

Total Cost of Project: _____

Estimated Start Date: _____ **Estimated Completion Date:** _____

Please attach the following:

- ✓ Project design in the form of drawings with proper use and description of materials
- ✓ Comprehensive business plan
- ✓ Amount of Property Owner's contribution (25%) in actual funds
- ✓ Proof of current property tax status
- ✓ Current and dated title search
- ✓ Three project bids from licensed, qualified contractors based in Palatka and/or Putnam County
- ✓ Fee to file contract with the Putnam County Clerk of Courts

**Application will not be reviewed without all supporting data. Send application packet to:
SHNA <> PO Box 2507 <> Palatka, FL 32178 or call (386) 325-9418 for further assistance.**

I hereby submit the attached plans & specifications for the proposed project and understand the Palatka Building Official and SHNA Grant Review Committee must approve these. No work shall begin without written approval. No funding is guaranteed until completed application packet has received final approval.

