



Township of Woodbridge

John E. McCormac, Mayor

Office of the Mayor

John E. McCormac, Mayor
One Main Street • Woodbridge, New Jersey 07095
Tel: (732) 602-6015 • Fax: (732) 602-6016
Email: wbmayor@twp.woodbridge.nj.us



March 27, 2019

Dear Downtown Merchant, Small Business Owner and/or Property Owner: *Woodbridge - Ten Towns, One Community*

We would like to take this opportunity to introduce you to the co-sponsored Woodbridge Township & Main Street **SID Façade Improvement Program** – a grant program that offers up to \$2,500.00 of matching funds to small business owners-operators located within the Special Improvement District (SID) to invest in building façade and exterior renovations & improvements.

The **Façade Improvement Program** is designed to encourage the continued economic success and viability of our small businesses, support our Buy Local program, improve the appearance and historic character of the business district and/or redevelopment area, and provide financial assistance to small businesses and property owners as an incentive to improve building facades, install new storefronts, awnings, signage and make other exterior improvements.

The Façade Improvement Program, funded through the Main Street Special Improvement District Tax Assessments, provides for matching grants of up to \$2,500.00 per project. When a business spends \$2,500.00 (or more) on building improvements, they will receive a matching contribution from the program to fund those enhancements of up to \$2,500.00.

Through the **Façade Improvement Program**, it is our hope that more small businesses will be able to make improvements to their storefronts – improvements that translate into a more vibrant and successful shopping district, which in turn provides better shopping opportunities for residents and consumers. And, by investing in our small businesses, we are investing in the continued viability and economic success of Woodbridge Township.

We are encouraging all downtown business merchants and/or small business owners to participate in the program. To take advantage of the matching grant, please contact the Department of Planning & Development, Façade Improvement Program, Township of Woodbridge, One Main Street, Woodbridge, NJ 07095 or call 732-634-4500 x6432.

John E. McCormac
Mayor

Façade Improvement Application

Date of Application: _____

I. APPLICANT

Type Applicant _____ Owner _____ Tenant

A. Name of business (legal name without abbreviation).

Business Address, City, State, Zip Code: _____

Type of Business: _____

Name of Contact Person and Title: _____

Home Address: _____

Business Telephone Number: _____

Home Telephone Number: _____

Employer's ID No. (or SS#): _____

Date Business Established: _____

B. Applicant Business Organization:

____ Corporation ____ Partnership ____ Sole Proprietorship

C. 1. Name, address, and telephone number of owner(s) (all persons with ownership interest in the business) of applicant business:

II. PROPOSED PROJECT

A. SUMMARY: Please provide a brief narrative description of the proposed project (attach additional sheets, if necessary). Attach a plan of the proposed project.

B. Project Site.

1. Street address and City: _____

2. Indicate approximate size of building(s) facade: _____

3. Indicate number of businesses to be assisted by proposed project: _____

4. Indicate the present ____ owner, or ____ tenant of project site if different from applicant:

Name: _____

Telephone: _____

Business Address: _____

Contact Person: _____

C. Other Information – to be submitted prior to receipt of Commitment Letter from the Department of Planning and Development.

1. Copy of Deed and Lease Agreement with property owner/tenant as applicable.

2. Certifications of Concurrence concerning improvements for site owner if applicant is not site owner.

3. Certification from business tenants.

III. CERTIFICATION OF APPLICANT

PLEASE NOTE:

Eligibility for financial assistance is determined by the information presented in this application and in the required attachments. Any changes in the status of the proposed project from the facts presented herein could disqualify the project, including, but not limited to, commencement of construction prior to written approval. Please contact the staff of the Department of Planning and Development before taking any action which would change the status of the project as reported herein.

I (WE), THE UNDERSIGNED, DO HEREBY CERTIFY:

1. The information contained in this application and in all attachments submitted herewith is to the best of my knowledge true and complete.
2. Understand that if such information is willfully false, the Department of Planning and Development, at its option, may terminate its financial assistance and demand return of the grant, with appropriate penalties and the costs incurred to recuperate grant monies.
3. I (we) shall not in any way collude, conspire, connive or agree, directly or indirectly, with any contractor, firm or person to submit a collusive or sham estimate or bid in connection with the contracts for which the contractor shall submit and will not in any manner, directly or indirectly, seek by agreement or collusion or communication or conference with any contractor, firm or person to fix the price or prices of the estimates, quotations or bids of any contractor, or to fix any overhead, profit or cost element of an estimate or bid price or proposal of any contractor, or to secure through any collusion, conspiracy, connivance or unlawful agreement any advantage against the Department of Planning and Development or any other person interested in the proposed contract.

Owner or Business Tenant

Date

DEPARTMENT OF PLANNING & DEVELOPMENT
FACADE PROGRAM
TOWNSHIP OF WOODBRIDGE

OWNER CERTIFICATION

The undersigned hereby certifies and warrants that:

1. I (we) am (are) the owner(s) of property identified on municipal tax maps as Lot _____ Block _____ and commonly known as: _____, in the Township of Woodbridge, State of New Jersey;
2. I (we) lease the above referenced property to _____;
3. I (we) am (are) aware that _____ has applied for assistance from the Facade Program administered by the Department of Planning and Development to partially finance certain facade improvements at the above referenced property owned by me (us);
4. I (we) hereby authorize the above referenced tenant to complete the proposed façade improvements as proposed in the tenant's application to the Facade Program; and
5. I (we) indemnify and hold harmless the Township of Woodbridge, New Jersey and their agents from any litigation which may arise from the construction of the proposed facade improvements.

_____ Witness	_____ Owner	____/____/____ Date
_____ Witness	_____ Owner	____/____/____ Date

DEPARTMENT OF PLANNING & DEVELOPMENT
FACADE PROGRAM
TOWNSHIP OF WOODBRIDGE

BUSINESS TENANT CERTIFICATION

The undersigned hereby certifies and warrants that:

1. I (we) am (are) the tenant(s) of property identified on municipal tax maps as Lot _____ Block _____ and commonly known as: _____ in the Township of Woodbridge, County of Middlesex, State of New Jersey;
2. I (we) lease the above referenced property from _____;
3. I (we) am (are) aware that _____ has applied for assistance from the Facade Program administered by Department of Planning and Development to partially finance certain facade improvements at the above referenced property leased by me (us);
4. I (we) hereby authorize the above referenced owner to complete the proposed facade improvements as proposed in the owner's application to Department of Planning and Development for the Township of Woodbridge Façade Program; and
5. I (we) indemnify and hold harmless the Township of Woodbridge, New Jersey and and their agents from any litigation which may arise from the construction of the proposed facade improvements.

_____ Witness	_____ Tenant	____/____/____ Date
_____ Witness	_____ Tenant	____/____/____ Date