

DOWNTOWN DALLAS, INC. 2024 Matching Grant Program Application

Applicant Name: Street Address		General Information		
Address: Street Address				
Address: Street Address	Annlicant Name			
Street Address City State ZIP Code Phone Number: Email Address: Project Location Project Name: Project Address: Street Address Unit # City State ZIP Code	Applicant Name:			
Street Address City State ZIP Code Phone Number: Email Address: Project Location Project Name: Project Address: Street Address Unit # City State ZIP Code				
City State ZIP Code Phone Number: Email Address: Federal Tax ID: Project Location Project Name: City State ZIP Code	Address:			
Phone Number: Email Address: Federal Tax ID: Project Location Project Name: Street Address: Unit # City State ZIP Code		Street Address		Unit #
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Federal Tax ID: Project Location Project Address: Street Address Unit # City State ZIP Code		City	State	ZIP Code
Federal Tax ID: Project Location Project Address: Street Address Unit #	Phone Number:			
Project Location Project Name: Street Address: City State ZIP Code				
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Project Name: Project Address: Street Address Unit # City State ZIP Code				
Project Address: Street Address Unit # City State ZIP Code		Project Location		
Project Address: Street Address Unit # City State ZIP Code				
Project Address: Street Address Unit # City State ZIP Code	Droject Name:			
Street Address Unit # City State ZIP Code	rioject Name.			
Street Address Unit # City State ZIP Code				
City State ZIP Code	Project Address:			
		Street Address		Unit #
		City	Stato	7IP Code
Will the proposed project be constructed on private property?		Oity	State	Zii Oode
Will the proposed project be constructed on private property?				
	Will the proposed proje	ect be constructed on private property?		
□ V*	□ V*			
□ Yes*				

• •	•	of the applicant to provide written consent of the proposed project. Please provide the	
Property Owner Name	::		
Property Owner Addre	ess:	Street Address	Unit #
		City State	ZIP Code
Property Owner Phone	e Numbe	er:	
Property Owner Email	Addres	ss:	
		Project Description	
Project Type: (select all that apply)	□ S s fi	Safety and Security Project: the project will improve public security, help deter crime, and enhance the perception of public safety Streetscape Project: the project will improve publicly-accessible areas via sidewalk or other infrastructure enhancements, permanent street furnishings, public art, and ground-floor, exterior façade rehabilitations Landscape Project: the project will improve the appearance of a building or property's permanent landscaping or public space(s)	
Please describe the pu	urpose c	of the proposed project. Attach additional լ	pages if necessary.

	s does the proposed proje		additional pages	
What are th	e objectives of the propos	sed project? Attacl	n additional pages	if necessary.
What trans	formative strategies of the	360 Plan will the p	roposed project ac	ddress? Describe
	ed project will further thos			

Applicants are responsible for the general operations and ongoing maintenance of the proposed project, once it is complete. What are the maintenance requirements of the proposed project?
Who will fund and provide ongoing maintenance of the proposed project?
In an effort to meet the City of Dallas Good Faith Effort Plan, proposed projects should include at least a 25% participation rate of minority- and women-owned business enterprises (M/WBEs) in the project's construction. Will M/WBEs participate in the proposed project's construction?
☐ Yes☐ No

If yes, what is the anticipated participation rate of M/WBEs in the proposed project?				
Will the proposed project require the approval of control Dallas?	other entities or organizations, such as the City of			
☐ Yes☐ No				
If yes, what entities must provide approval? What	is the schedule for such approvals?			
Grant R	Request			
Grant Request Amount: Must be less than or equal to Applicant's Contribution	sion			
Applicant's Contribution:	\$			
Total Cost of Proposed Project:	\$			
Estimated Pro	ject Schedule			
	,			
Construction Plans:	Date Date			
Permits Secured:	Date			
Construction Begins:	Date			
Project Completion:	 Date			

Required Documentation

Check the documents that are included with this ap accepted.	plication. Incomplete applications will not be			
 □ Complete 2024 Matching Grants Program Applic □ Map of proposed project location □ Signed approval letter from the owner (or agent) constructed (if applicable) □ List of proposed M/WBE contractors (if applicable) □ Budget Summary (to include job estimates or que □ Color photographs of project area □ Schematic drawings of proposed project □ Contificate of Liability Jacquesage 	of property upon which the project will be			
☐ Certificate of Liability Insurance☐ IRS Form W-9				
Certifica	ation			
As duly authorized representative of the entity making this grant application, I hereby certify that all of the information provided herein is true and represents the desires of this organization, and will assure that funds received as a result of this application will be used only for the purposes as stated in the application and that the project is on schedule for completion by December 1, 2024.				
Signature of Authorized Representative	Date			
Printed Name and Title of Authorized Representative				