Customer #Permit #	Application #
CITY of HARRISONVILLE, MO. Commercial Property Trash Container/Dumpster Screening and Demolition of Non-Conforming Signs and Sign Structures Grant Program Application	
TO BE COMPLETED BY APPLICANT	
Owner of Record:	
Grant Address:	Zip:
Mailing Address:	City/State/Zip:
Phone #:	Alternate Phone #:
E-Mail:	
Existing Use of Property:	
Description of Improvements:	
Est. Completion Date (180 days max.):	
Est. Cost of Improvements: \$	
Applicant is property owner of record or owner statement of applicant as owner's agent is attached.	
DISCLAIMER	
By signing below I understand this application is good for only 180 days and all encumbered grant funds will be forfeited if work is not completed within that time. Additionally, I understand this is a City program and all information concerning this grant may become public record. This includes, but is not limited to, the usage of before and after photos in various forms of media such as the City website, newsletter, or future program pamphlets or documents. City inspections of my property will be performed by City staff before the grant is approved, during the grant period, and after the project is complete.	
Signature of owner of record or owner's agent:	Date:
TO BE COMPLETED BY CITY STAFF ONLY	
<u>BEFORE</u>	AFTER
Funding is still available	Work completed
Signatures	Improvements meet City & Building Code requirements
Improvements are eligible	After Pictures
Real estate taxes current	Receipts
Current City Business License	
Building permit required and complete (if applicable)	60 days progress %
Before Pictures	
City Code violations to be corrected Y N	
Total Spent 25% Reimbursement	
City Signature:	Date:

