

Applicant

1 Name:

Address:

Email:

Phone #:

2 Is this project affiliated with an LLC?

Yes

No

If yes, please list all persons affiliated & include the LLC Agreement: (If more room is needed, please attached a separate sheet of paper with all requested information for each individual)

	Name	Address	Phone #	E-mail:
1				
2				
3				
4				
5				

1

2

3

4

5

3 Project Description

Project Name:

Project Address:

Is the property within the Redevelopment Area?

Yes

No

Please describe the project detail, how the project will impact economic development and revitalization in the City (use additional sheet as needed):

Is this project coordinated with PADCO?

Yes

No

If yes, please submit copies of the Project Timeline, Overall Budget, and Business Plan

If no, please submit copies of the Project Timeline, Overall Budget, and Business Plan (as applicable)

\*\*All projects must be completed within 18 months\*\*

Applicant Signature

Applicant Signature

Applicant Signature

Approvals:

Project Reviewed by the Pottsville Redevelopment Authority on:

Amount requested from the Redevelopment Authority:

Amount requested and/or approved from PADCO:

Overall Budget Amount:

Project Approved by the Pottsville Redevelopment Authority on:

Chairman of the Redevelopment Authority

Executive Director of the Redevelopment Authority