City of Rancho Mirage - Development Services Department

# PROPERTY IMPROVEMENT PROGRAM APPLICATION

## I. APPLICANT INFORMATION

**DATE:** _____

**1.** Applicant Name: _____

Mailing Address: _____

Telephone Number(s): _____

Fax Number: _____

Email: _____

**2.** Relationship of Applicant to the property to be renovated

- ○ Owner: Attach copy of latest tax bill and proof of payment
- ○ Tenant: a) Attach copy of Rancho Mirage Business License, and
  b) Attach written permission from building owner to participate in Property Improvement Program, including expiration date of present lease.

**3.** Business Organization

○ Corporation ○ Partnership ○ Sole Proprietorship

Business Name: _____

## II. PROPOSED PROJECT INFORMATION

**1.** Street Address: _____

Description of Property: _____

**2.** Level of Assistance Requested:

- ☐ Monument Sign (Stop. Sign and Return Application)
- ☐ Property Assistance (Continue Application)

**3.** *Property Assistance ONLY* - Describe the scope of work you want for this proposed property improvement. (Check all that apply and/or describe improvement ideas.)

| | | |
|---|---|---|
| ☐ Exterior Signage | ☐ Exterior Lighting | ☐ Exterior Painting |
| ☐ Parking Lot Improvements | ☐ Storefront Windows | ☐ Storefront Door |
| ☐ Exterior Paneling/Siding | ☐ Awning/Canopy | ☐ Fencing/Walls |
| ☐ Add Architectural Details | ☐ Landscape | ☐ Other: describe below |

_____

_____

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**4.** *Property Assistance ONLY* - Please indicate the total estimated improvement budget. The City's consulting architect takes into account the project budget when creating conceptual designs:

**Total Budget: $** 0.00 Applicant Funds: $ 0.00 (Minimum 20% of Total Budget) City Funds: $ 0.00 (Maximum 80% of Total Budget)

## CERTIFICATION

The undersigned hereby represents and certifies to the best of his/her knowledge and belief that the information contained on this statement and any exhibits or attachments hereto are true and complete and accurately describe the proposed project, and the undersigned agrees to promptly inform the City of Rancho Mirage Economic Development Division of any changes in the proposed project which may occur.

Signature of Building Owner _____ Date _____

Print Name _____

Signature of Commercial Tenant (if Applicant) _____ Date _____

Print Name _____

## RETURN COMPLETED APPLICATION

Deliver, Mail, Email or Fax Completed Application to:

City of Rancho Mirage
Economic Development Division
Attn: Joseph E. Carpenter, Economic Development Analyst
69-825 Highway 111
Rancho Mirage, CA 92270

Telephone: (760) 324-4511
Fax: (760) 324-1617
Email: josephc@ranchomirageca.gov