1 Administrative items
   A. Approval of the Workshop and Meeting Minutes from 3-26-15

2 Action items
   A. 2015-16 Grant Programs
      - Commercial Exterior Improvement Program
      - Business Sign Replacement Program
      - Organizational Support Program
      - Home Renovation Program
      - Driveway Renovation Program
      - Paint-only Program

3 Informational items

4 New business items

5 Adjournment items

appeals & assistance

"If a person decides to appeal any decision made by the Commission with respect to any matter considered at such meeting or hearing, he/she will need a record of the proceedings, and that, for such purpose, he/she may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.” (F. S. 286.0105).

"Persons with disabilities needing assistance to participate in any of these proceedings should contact the City Clerk’s Office (407-599-3277) at least 48 hours in advance of the meeting.”
Chairman Hal George called the meeting to order at 11:03 am.

**BOARD MEMBERS PRESENT:** Hal George, Joe Terranova, Woody Woodall, and Daniel Butts. Alan Thompson joined the meeting at 12:00 pm

**BOARD MEMBERS ABSENT:** John Dowd, Lance Decuir, Jeff Stephens

**STAFF MEMBERS PRESENT:** Dori Stone, David Buchheit, Laura Neudorffer, Kyle Dudgeon, Craig O’Neil

**ADMINISTRATIVE ITEMS:**

**Item A: Approval of Minutes**
Approval of the February 19, 2015 Work Session and Regular Meeting Minutes.

**ACTION ITEMS:**

**Item A: 2015 Winter in the Park:**
CRA Staff presented an update on the 2014 WITP Ice Rink and discussed the progress and path for the 2015 WITP Ice Rink. Board referenced the option of purchasing certain items to offset future costs and build event inventory with one of those items being a tent. Board expressed an interest in the possibility of creating a permanent structure/area for future WITP Ice Rink events. Another point of concern with the WITP Ice Rink event brought up by the Board was the amount of staff time that is involved. The Board feels that it may pull staff focus away from other projects, programs, work that is just as important.

**Item B: Project and Grant Prioritization for Capital Improvement Plan:**
CRA Staff reviewed the proposed grants, programs, and program modifications to the Board for discussion on directing how staff should proceed. CRA Staff also reviewed the Capital Improvement Plans. Each Board member was provided with a list of items for each category and asked to rank them in the order they feel should be addressed by Staff.

There being no further business to discuss, the work session adjourned at 1:12 p.m.

____________________
Chairperson, Hal George

________________________
CRA Coordinator/Board Liaison, Laura Neudorffer
Chairman Hal George called the meeting to order at 1:13 pm.

**BOARD MEMBERS PRESENT:** Hal George, Joe Terranova, Woody Woodall, Daniel Butts, and Alan Thompson

**BOARD MEMBERS ABSENT:** John Dowd, Lance Decuir, Jeff Stephens

**STAFF MEMBERS PRESENT:** Dori Stone, David Buchheit, Laura Neudorffer, Kyle Dudgeon, Craig O’Neil

**ADMINISTRATIVE ITEMS:**

**Item A: Approval of Minutes**
Approval of the February 19, 2015 Work Session and Regular Meeting Minutes. 
Motion made by Joe Terranova, seconded by Daniel Butts, to approve the February 19, 2015 Work Session and Regular Meeting minutes. Motion approved 5-0.

**ACTION ITEMS:**

**Item A: 2015 Winter in the Park:**
CRA Staff presented an update on the 2014 WITP Ice Rink and discussed the progress and path for the 2015 WITP Ice Rink. CRA Staff requested approval of the 2015 WITP Ice Rink budget of $225,000.

Motion made by Daniel Butts, seconded by Alan Thompson, to approve the 2015 WITP Ice Rink budget request. Motion approved 5-0.

**Item B: Project and Grant Prioritization for Capital Improvement Plan:**
CRA Staff reviewed the proposed grants, programs, and program modifications to the Board for discussion on directing how staff should proceed. CRA Staff also reviewed the Capital Improvement Plans. Each Board member was provided with a list of items for each category and asked to rank them in the order they feel should be addressed by Staff.

Motion made by Alan Thompson, seconded by Joe Terranova, to table the Grant prioritization until the next regular meeting. Motion approved 5-0.

Motion made by Alan Thompson, seconded by Woody Woodall, to approve the Capital Improvement Plan items as presented, with the amendment that staff will work with Utilities Department regarding undergrounding. Motion approved 5-0.

Public comments presented by Linda Walker were entertained by the Board and CRA Staff. Ms. Walker expressed her concern with the SYEP and questioned as to why the budget could not be increased for this program sooner rather than later as discussed in the budget. She also expressed concern about the Housing Rehabilitation Program and feels it should continue to allow interior repairs to be eligible in the program. Ms. Walker also stated that she does not agree with a Driveway Renovation Grant program and
feels it is not a good idea. Her concerns were addressed by both the CRA AB Chairman, Mr. Hal George, and the Planning & CRA Director, Mrs. Dori Stone.

There being no further business to discuss, the work session adjourned at 1:33 p.m.

________________________
Chairperson, Hal George

________________________
CRA Coordinator/Board Liaison, Laura Neudorffer
Subject: Item 2a

Grant Programs for 2015-16

motion | recommendation
Staff is requesting prioritization and approval of the following grants to be implemented during the 2015-16 fiscal year.

background
Staff is presenting and six grant programs for review.

Grant Programs (in alphabetical order):
- Business Façade Grant
- Business Sign Replacement Grant
- Driveway Renovation Grant
- Home Renovation Grant
- Organizational Support Grant
- Paint Only Grant

Staff is requesting that the CRA Advisory Board prioritize and approve grants for the 2015-16 fiscal year.

alternatives | other considerations
N/A

fiscal impact
TBD
The Community Redevelopment Agency (CRA) of the City Of Winter Park established the Commercial Exterior Improvement Grant Program to provide a financial incentive to property and business owners to renovate and reinvest in the exterior of their business or commercial property. The program specifically encourages redevelopment and reinvestment for commercial properties located in the Winter Park CRA district of the City.

**ELIGIBLE APPLICANTS**
- The grant applicant must be a property owner or a business owner leasing a storefront;
- The business must be located within the boundaries of the Winter Park CRA (see map);
- If applying as the tenant, an affidavit must be signed by the property owner consenting to the improvements (see application);
- Proposed project must be a small business as defined by the U.S. Small Business Administration (For more information visit [www.sba.gov/size](http://www.sba.gov/size);
- Business may be an individually owned franchise as long as it meets all other criteria;
- Tenant must have at least two years remaining in lease at location of proposed project;
- Exterior Improvement Program Grant can only be used once per building; regardless of ownership;
- Buildings with multiple occupants may be eligible on a case by case basis;
- The project applicant must owe no outstanding property taxes, fees, judgment, or liens to the City of Winter Park or Orange County and have no outstanding code violations.

**Ineligible Applicants:** National corporate franchises, government offices and agencies (non-governmental, for-profit, tenants are eligible), businesses that exclude service to minors, properties primarily in residential use, properties exempt from property taxes.

**ELIGIBLE PROJECTS**
The Exterior Improvement Grant program is funded through Community Redevelopment Agency funds. The CRA will match the Owner/Lessee up to fifty percent (50%) of the total cost of eligible improvements up to $20,000. Project cost must exceed $2,500 of eligible improvements to be considered for façade grant. All work must be done on the exterior of a street facing side of the building.

**Eligible work:** Rehabilitation of building facades visible to the street or public right-of-way, including:
- storefron
• signs and graphics;
• exterior lighting;
• canopies and awnings;
• painting and masonry work.

Following repairs are allowed as long as they are part of work which is directly visible from public right-of-ways and specifically approved by the CRA:

• landscaping and irrigation;
• fences;
• seal coating, re-striping of parking lots and bike racks.
• New construction may be considered on a case-by-case basis if the applicant is upgrading the current façade of a property.

Ineligible Activities:
• roofs;
• structural foundations;
• billboards;
• security systems;
• non-permanent fixtures;
• interior window coverings;
• personal property and equipment;
• security bars; razor/barbed wire fencing;
• sidewalks and paving;
• all necessary government approvals, building permits, and taxes;
• services performed by a non-licensed contractor
• work performed prior to grant award

AWARD REIMBURSEMENT
Reimbursement shall be limited to no more than 50% of the total cost of eligible improvements, not to exceed $20,000 per storefront. Larger buildings with more than one storefront and/or more than one side visible (on a corner) may be considered for a larger grant on a case by case basis by the CRA Director. Any projects totaling less than $2,500 in qualified improvements are not eligible.

Approved applicants may request on up to 50% of the estimated awarded grant funds, with proof of paid invoice. The remaining grant funds will be paid once the project is complete. Grants are awarded on a first come, first served basis, as long as funding remains available in the program.

The CRA reserves the right to refuse reimbursements in whole or in part for work that is not completed within 9 months. The CRA cannot reserve funds indefinitely, grants may be subject to cancellation if not completed or significant progress has not been made by the completion
date. Request for extensions will be considered only if made in writing and progress towards completion has been demonstrated.

In the event all programs funds have been committed, owner/lessee may still submit an application, complete approved façade work and be reimbursed for that work if funding is approved. Due to the uncertain nature of budget availability in any given year, the CRA cannot guarantee that funding will be available or if any applicant will be reimbursed. Applicants who submit a completed application and are on the waiting list may be eligible to be reimbursed if funding becomes available up to one year past the date of their application submittal. Work completed in advance of funding availability must be maintained in like-new condition and match with the scope of work submitted with the application in order to receive reimbursement. Only applicants that have previously applied, and been placed on the waiting list prior to beginning any exterior improvement under this program, may be eligible for funding.

**Multi-Tenant Building:** Business tenants in a multi-tenant property may apply to the program as long as the tenant has a clearly definable independent entrance into the storefront that is clearly visible from public rights-of-way (ex. strip-mall tenants). Business tenants in multi-tenant buildings that do not have independent storefronts are not eligible to apply, however the property owner may still apply if they meet all other eligibility requirements. Multi-tenant property owner may still apply if they meet all other eligibility requirements. Property owners will not be able to apply if other tenants in the same property have previously used the program. If no other tenant in the property has utilized the program then the property owner may apply as the applicant and receive up to $20,000 for the entire property.

**COMPETITIVE BIDDING** Applicants are required to get two (2) competitive bids for every type of proposed work. The CRA will match up to 50% of the cost up to $20,000. All contractors must be insured and licensed by the State of Florida. All construction contracts will be between the applicant and contractor.

**APPROVALS**
The CRA has the sole authority to determine eligibility of proposed work and confirmation of completed work. Certain work may be required or precluded as a condition of funding. Participants will be responsible for obtaining necessary regulatory approvals, including any needed by City departments or boards and including, but not limited to, building permits and any other necessary permits. All work must comply with city, state and federal regulations.

**CONTRACTUAL AGREEMENT**
Accepted applicants must enter into a contractual agreement with the CRA prior to disbursement of grant funds.
SUBMISSION REQUIREMENTS
Application packages must include documentation that illustrates the visual impact of the project and its cost.

*Failure to provide required information will delay the review and/or approval process.*

The applications must include the following attachments:
1. Complete application form
2. Copy of current business license
3. Copy of current property insurance
4. Written consent from property owner giving permission to conduct exterior improvements *(if necessary)*
5. Digital photographs of existing conditions of project
6. Written description of project improvements including material list and color selections
7. Simple sketch of improvement project
8. Two competitive bids for each type of work proposed

Submit complete applications to:
Community Redevelopment Agency
Attn: Exterior Improvement Grant Program
401 Park Avenue South
Winter Park, FL 32789

For more information about the CRA’s Business Façade Program, please contact our office at 407-599-3217.
City Of Winter Park
Community Redevelopment Agency
(CRA) Exterior Improvement Grant Program

1. APPLICANT
Name: ________________________________________________________________
Address: ________________________________________________________________ Zip ____________
Contact Name: __________________________ Phone Number: ______________________
Email: __________________________ Fax Number: __________________________
Legal Form: Sole Proprietorship ☐ Partnership ☐
Corporation: Profit ☐ Non-Profit ☐
In which State are the incorporation and/or organization documents filed?
_____________________________________________________________________
Tax Identification Number: __________________________

2. BUILDING/BUSINESS TO BE IMPROVED
Name: ________________________________________________________________
Address: ________________________________________________________________ Zip ____________
Legal Description: ______________________________________________________
Property Tax Parcel Number: __________________________

3. OWNER OF PROPERTY (if not applicant)
Name: ________________________________________________________________
Contact Name: _________________________________________________________
Address: ________________________________________________________________ Zip ____________
Phone Number(s): __________________________

Staff Use Only: Application Approved ( Y / N ) Date: ________________ By: ________________
4. AUTHORIZATION TO UNDERTAKE WORK
If the applicant is not the owner of the property, provide written evidence in the form below that the owner authorizes this work to be undertaken.

5. BRIEF DESCRIPTION OF PROPOSED EXTERIOR IMPROVEMENTS
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

6. ESTIMATED COST OF WORK FROM BIDS RECEIVED (Applicant may make multiple copies of this page if the applicant is acting as their own General Contractor and more than one type of work is being performed. List each type of work separately under item 5 and enter the required bids below.)
Bid #1:
Company Name: _______________________________________________________
Contact Name: _______________________________________________________
Contact Phone Number: _________________________________________________
Bid Amount for Total Work: $__________.____
Bid #2:
Company Name: _______________________________________________________
Contact Name: _______________________________________________________
Contact Phone Number: _________________________________________________
Bid Amount for Total Work: $__________.____

7. SOURCE(S) OF ADDITIONAL FUNDING
____________________________________________________________________
____________________________________________________________________

8. INVESTMENT VALUE OF WORK BEING PERFORMED BY APPLICANT
Include the total cost estimate of all work being performed at the business, both exterior and any interior improvements being made. $__________.____
8. ACKNOWLEDGEMENTS

☐ I have read and understand the program guidelines and criteria
☐ I have attached a copy of my current business license to this document
☐ I have attached a copy of my current property insurance
☐ To the best of my knowledge the business and the property are current on all local, state and federal taxes
☐ I have attached a copy of the scope of work and available drawings or sketches
☐ I understand that final approval must come from all City departments concerned with any improvement and that award of the grant by the CRA does not guarantee approval of the project. The applicant must meet all City requirements and codes.
CERTIFICATION BY APPLICANT
The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a 50/50 grant and is true and complete to the best of the applicant’s knowledge and belief.

If the applicant is not the owner of the property to be rehabilitated, or if the applicant is not the sole owner of the property, the applicant certifies that he/she has the authority to sign and enter into an agreement to perform the rehabilitation work on the property. Evidence of this authority must be attached.

The CRA is dedicated to promoting and encouraging diversity in the programs that it supports or funds. Successful applicants in the CRA Commercial Exterior Improvement Grant Program are encouraged to contact contractors that are certified minority owned or small businesses.

Verification of any information contained in this application may be obtained by the CRA from any available source.

________________________________________
Applicant Signature

________________________________________
Date

Please return a copy of this completed application along with any supporting documentation to the CRA.

Community Redevelopment Agency
401 S. Park Ave
Winter Park, FL 32789

For additional information please contact:
Kyle Dudgeon
Economic Development/CRA Program Manager
Phone: 407-599-3217
Email: kdudgeon@cityofwinterpark.org
Exterior Improvement Grant Program Property Owner Authorization

I, _______________________________________________________________, understand that ___________________________________________, a leaseholder of my property located at ______________________________________, is considering improvements under the City of Winter Park Community Redevelopment Agency Commercial Exterior Improvement Grant Program, hereinafter referred to as “Program.” For the purposes of this authorization, hereinafter the Community Redevelopment Agency shall be referred to as “CRA” and the City of Winter Park as “City”.

I have received and reviewed the Program guidelines and reviewed the application submitted by my tenant. I agree to permit the proposed improvements to my building. I understand that I am not financially responsible to complete these improvements under the Program.

I understand and agree that neither the CRA nor the City assume responsibility or liability to me or any other part for any action or failure of any contractor or other third party and in no way guarantee any work to be done or material to be supplied.

I further agree to hold the CRA and the City harmless from and indemnify them for and against any and all claims which may be brought or raised against the CRA, the City, or any of its officers, representatives, agents or agencies regarding any matters relevant to the participant obligations under the Program.

I assure the CRA and the City that the tenant holds a valid lease with no expiration pending within the next twenty-four months following the date of application for Program funding.

I have read the above statements and acknowledge that they are true and complete to the best of my knowledge. I have no objection to the applicant pursuing the proposed improvements project, and I authorize the leaseholder to make the proposed improvements under the provisions of the Program.

__________________________________________  __________________________
Property Owner Signature                        Date

STATE OF FLORIDA
COUNTY OF ______________________

The foregoing instrument was acknowledged before me this_____day of_______,20___

by___________________________________________________________, who is personally

known to me or who has produced______________________________as identification.

__________________________________________
Notary Public
City of Winter Park CRA
Business Sign Replacement
Program Guidelines

The Community Redevelopment Agency (CRA) of the City Of Winter Park established the Business Sign Replacement Grant program to provide a financial incentive to property and business owners to replace existing pole style signs and reinvest in the exterior of their business or commercial property with a monument style sign. The program specifically encourages redevelopment and reinvestment for commercial properties located in the Winter Park CRA district of the City.

ELIGIBLE APPLICANTS
- The grant applicant must be a property owner or a business owner leasing a storefront;
- The business must be located within the boundaries of the Winter Park CRA (see map);
- If applying as the tenant, an affidavit must be signed by the property owner consenting to the improvements;
- Proposed project must be a small business as defined by the U.S. Small Business Administration (For more information visit www.sba.gov/size);
- Business may be an individually owned franchise as long as it meets all other criteria;
- Tenant must have at least two years remaining in lease at location of proposed project;
- Business Sign Replacement Program can only be used once per building; regardless of ownership
- The project applicant must owe no outstanding property taxes, fees, judgments, or liens to the City of Winter Park or Orange County and have no outstanding code violations.

Ineligible Applicants: National corporate franchises, government offices and agencies (non-governmental, for-profit, tenants are eligible), businesses that exclude service to minors, properties primarily in residential use, properties exempt from property taxes.

ELIGIBLE PROJECTS
- Project cost must exceed $1,000 of eligible improvements
- Free standing exterior sign visible from a commercial corridor.
- Signage shall be designed, constructed, and maintained to complement and accent the architectural features of the building. It should harmonize with the overall character of the built environment.

Eligible work: Exterior signage, to include the removal of pole style signs and replacement with monument style signs.
**Ineligible Activities:** Repair of existing pole signage; replacement of existing pole style signage with pole style signage.

**AWARD REIMBURSEMENT**
Reimbursement shall be limited to no more than 75% of the total cost of eligible improvements, not to exceed $10,000. Larger signs with more than one tenant and/or more than one side visible (on a corner) may be considered for a larger grant on a case by case basis by the CRA Director. All necessary government approvals, building permits, and taxes are not eligible for reimbursement. Any projects totaling less than $1,000 in qualified improvements are not eligible.

Approved applicants may request on up to 50% of the estimated awarded grant funds, as determined by the lowest bid on the application, with proof of paid invoice. The remaining grant funds will be paid once the project is complete. Grants are awarded on a first come, first served basis, as long as funding remains available in the program.

The CRA reserves the right to refuse reimbursements in whole or in part for work that is not completed within 3 months. The CRA cannot reserve funds indefinitely, grants may be subject to cancellation if not completed or significant progress has not been made by the completion date. Request for extensions will be considered only if made in writing and progress towards completion has been demonstrated.

In the event all programs funds have been committed, owner/lessee may still submit an application, complete approved sign work and be reimbursed for that work if funding is approved. Due to the uncertain nature of budget availability in any given year, the CRA cannot guarantee that funding will be available or if any applicant will be reimbursed. Applicants who submit a completed application and are on the waiting list will be eligible to be reimbursed if funding becomes available up to one year past the date of their application submittal. Work completed in advance of funding availability must be maintained in like-new condition and match with the scope of work submitted with the application in order to receive reimbursement. Only applicants that have previously applied, and been placed on the waiting list prior to beginning any sign improvements, will be eligible for funding.

**COMPETITIVE BIDDING** Applicants are required to get two (2) competitive bids for every type of proposed work. The CRA will match up to 75% of the cost of the lowest bid up to $10,000, inclusive of any design or planning costs being reimbursed. All contractors must be insured and licensed by the State of Florida. All construction contracts will be between the applicant and contractor.

**APPROVALS**
The CRA has the sole authority to determine eligibility of proposed work and confirmation of completed work. Certain work may be required or precluded as a condition of funding. Participants will be responsible for obtaining necessary regulatory approvals, including any
needed by City departments or boards and including, but not limited to, building permits and any other necessary permits. All work must comply with city, state and federal regulations.

**CONTRACTUAL AGREEMENT**
Accepted applicants must enter into a contractual agreement with the CRA prior to disbursement of grant funds.

**SUBMISSION REQUIREMENTS**
Application packages must include documentation that illustrates the visual impact of the project and its cost. *Failure to provide required information will delay the review and/or approval process.*

The applications must include the following attachments:

1. Complete application form
2. Copy of current business license
3. Copy of current property insurance
4. Written consent from property owner giving permission to conduct sign improvements *(if necessary)*
5. Digital photographs of existing conditions of sign
6. Written description of project improvements including material list and color selections
7. Simple sketch of improvement project
8. Two competitive bids for each type of work proposed

Submit complete applications to:
Community Redevelopment Agency
Attn: Business Sign Replacement Program
401 Park Avenue South
Winter Park, FL 32789

For more information about the CRA's Business Sign Replacement Program, please contact:

Kyle Dudgeon
Economic Development/CRA Program Manager
407-599-3217
kdudgeon@cityofwinterpark.org
Winter Park Community Redevelopment Agency
Boundary Map

Business Sign Replacement Program

Last Updated: 4/17/2015
1. APPLICANT
   Name: ____________________________________________________________
   Address: __________________________________________________________
   ____________________________________________________________________ Zip __________________
   Contact Name: __________________________ Phone Number: ______________
   Email: _________________________________ Fax Number: __________________
   Legal Form: Sole Proprietorship ☐ Partnership ☐
   Corporation: Profit ☐ Non-Profit ☐
   In which State are the incorporation and/or organization documents filed?
   ____________________________________________________________________
   Tax Identification Number: ______________________________

2. BUILDING/BUSINESS SIGN TO BE IMPROVED
   Name: ____________________________________________________________
   Address: ____________________________________________________________  
   ____________________________________________________________________ Zip __________________
   Legal Description: ____________________________________________________
   Property Tax Parcel Number: ____________________

3. OWNER OF PROPERTY (if not applicant)
   Name: ____________________________________________________________
   Contact Name: ______________________________________________________
   Address: ____________________________________________________________
   ____________________________________________________________________ Zip __________________
   Phone Number(s): ____________________________________________________

Staff Use Only: Application Approved ( Y / N ) Date: _________________ By: __________

CRA Business Sign Replacement Program Application - Page 1 of 5  Updated on 4/17/2015
4. AUTHORIZATION TO UNDERTAKE WORK
   If the applicant is not the owner of the property, provide written evidence that the
   owner authorizes this work to be undertaken. (Typically a lease or other written
   permission that shows the owner has read the program guidelines and understands
   the conditions and restrictions.)

5. BRIEF DESCRIPTION OF PROPOSED IMPROVEMENTS

   ________________________________________________________________
   ________________________________________________________________
   ________________________________________________________________

6. ESTIMATED COST OF WORK FROM BIDS RECEIVED (Applicant may make multiple
   copies of this page if the applicant is acting as their own General Contractor and more
   than one type of work is being performed. List each type of work separately under item 5
   and enter the required bids below.)
   Bid #1:
   Company Name: ______________________________________________________
   Contact Name: _______________________________________________________
   Contact Phone Number: _______________________________________________
   Bid Amount for Total Work: $__________.____
   Bid #2:
   Company Name: ______________________________________________________
   Contact Name: _______________________________________________________
   Contact Phone Number: _______________________________________________
   Bid Amount for Total Work: $__________.____

7. SOURCE(S) OF ADDITIONAL FUNDING

   ________________________________
   ________________________________

8. INVESTMENT VALUE OF WORK BEING PERFORMED BY APPLICANT
   Include the total cost estimate of all work being performed at the business, both
   exterior and any interior improvements being made. $__________.____
9. ACKNOWLEDGEMENTS

☐ I have read and understand the program guidelines and criteria
☐ I have attached a copy of my current business license to this document
☐ I have attached a copy of my current property insurance
☐ To the best of my knowledge the business and the property are current on all local, state and federal taxes
☐ I have attached a copy of the scope of work and available drawings or sketches
☐ I understand that final approval must come from all City departments concerned with any improvement and that award of the grant by the CRA does not guarantee approval of the project. The applicant must meet all City requirements and codes.
CERTIFICATION BY APPLICANT
The applicant certifies that all information in this application, and all information furnished in support of this application, is given for the purpose of obtaining a 25/75 grant and is true and complete to the best of the applicant’s knowledge and belief.

If the applicant is not the owner of the property to be rehabilitated, or if the applicant is not the sole owner of the property, the applicant certifies that he/she has the authority to sign and enter into an agreement to perform the rehabilitation work on the property. Evidence of this authority must be attached.

The CRA is dedicated to promoting and encouraging diversity in the programs that it supports or funds. Successful applicants in the CRA Business Façade Matching Grant Program are encouraged to contact contractors that are certified minority owned or small businesses.

Verification of any information contained in this application may be obtained by the CRA from any available source.

________________________________________  __________________
Applicant Signature  Date

Please return a copy of this completed application along with any supporting documentation to the CRA.

Community Redevelopment Agency
401 S. Park Ave
Winter Park, FL 32789

For more information please contact:
Kyle Dudgeon
Economic Development/CRA Program Manager
Phone: 407-599-3217
Email: kdudgeon@cityofwinterpark.org
Business Sign Replacement Program
Property Owner Authorization

I, __________________________________________________________, understand that
________________________________________________________, a leaseholder of my property located at
________________________________________________________ is considering improvements under the City of
Winter Park Community Redevelopment Agency Sign Replacement Program, hereinafter referred to as “Program.” For the purposes of this authorization, hereinafter the Community Redevelopment Agency shall be referred to as “CRA” and the City of Winter Park as “City”

I have received and reviewed the Program guidelines and reviewed the application submitted by my tenant. I agree to permit the proposed improvements to my building. I understand that I am not financially responsible to complete these improvements under the Program.

I understand and agree that neither the CRA nor the City assume responsibility or liability to me or any other part for any action or failure of any contractor or other third party and in no way guarantee any work to be done or material to be supplied.

I further agree to hold the CRA and the City harmless from and indemnify them for and against any and all claims which may be brought or raised against the CRA, the City, or any of its officers, representatives, agents or agencies regarding any matters relevant to the participant obligations under the Program.

I assure the CRA and the City that the tenant holds a valid lease with no expiration pending within the next twelve months following the date of application for Program funding.

I have read the above statements and acknowledge that they are true and complete to the best of my knowledge. I have no objection to the applicant pursuing the proposed improvements project, and I authorize the leaseholder to make the proposed improvements under the provisions of the Program.

_______________________________  ______________________
Property Owner Signature     Date

STATE OF FLORIDA
COUNTY OF ____________________

The foregoing instrument was acknowledged before me this______ day of ________, 20___
by ____________________________, who is personally
known to me or who has produced __________________________ as identification.

_______________________________
Notary Public
Organizational Support Policy Guidelines
Winter Park Community Redevelopment Agency (CRA)

Purpose

The purpose of the Organizational Support Grant is to assist community organizations by providing a one-time financial contribution to associations serving the CRA area. This program was developed to assist non-profit that create programs to address specific needs within the community while supporting the mission and principles of the CRA. The organizational support program provides small monetary grants that are in no way intended to: provide general operating funds, finance agency operating or program, nor take the place of fundraising efforts.

General Requirements for Eligibility

Any organization seeking financial support from the City of Winter Park CRA must complete an application and meet the general requirements to be considered for funding. Grants are considered on a first come, first serve basis until funds are depleted for the fiscal year. The maximum amount of any sponsorship is $5,000 per agency or organization. The CRA is under no requirement or expectation to provide funding to any organization. Funding for this grant may vary depending upon the financial priorities within any given year.

General requirements include:

- Non-profit small business as defined by SBA or IRS respectively
- Either located or providing a service within the limits of the CRA
- Must provide a public service tied to the funding request
- Grant shall only be used one time per organization
- Other CRA program funding is separate and shall not be used in conjunction with this grant
- CRA support cannot exceed 25% of the total budget for the proposed project.

Ineligible use of funding:

- Subsidizing administrative & operating costs of the organization
- Use of funds outside contractual obligations in the agreement

Application Process

Organizations that meet the general requirements must complete an application and submit it to:

City of Winter Park CRA
ATTN: Organizational Support Grant
401 South Park Avenue
Winter Park, FL 32789
Only completed applications will be accepted. Applications will be reviewed for completeness and sent to the CRA Advisory Board for a recommendation to the CRA Agency. The CRA reserves the right to request a (pre)application meeting during review of the application. The CRA additionally has the right to close the application process in any fiscal year and choose to not accept new applicants.

Applications may take up to 90 days for review and may require CRA Agency approval at a regularly scheduled meeting. Applicants or a representative are required to be in attendance when their funding request is being considered by the CRA Agency.

**Contractual Agreement**

Applicants approved for funding will enter a contractual agreement with the CRA that outlines general obligations and reporting requirements, terms of payment, and goals and objectives for the proposed fiscal year. Contracts will include reference to the projects/programs to be accomplished and their planned completion dates as well as benchmarks and measurements for evaluating progress.

**Grant Disbursement and Reporting Requirements**

Approved grants will be disbursed subject to the contract agreement. Approved organizations may be required to submit regular updates as well as a one-time report outlining how funds were utilized during the CRA’s fiscal year in which the grant was awarded. Below is an outline of reporting requirements:

- Site visit from CRA staff
- Revenues and spending
- Program/project activities
- Measurements and Benchmarking *(as described below)*:

**Measurements and Benchmarking**

Any organization receiving funding from the CRA will be asked to provide data related to metrics and benchmarks associated with their contractual agreements. Items which may be requested include, but are not limited to:

- Before and after site visits
- Photos of project scope
- Organizational, operational, and capital budget/financial information
- Employee structure and compensation
- Other revenues, grants, and contributions received
- In-Kind contributions
- Volunteer or community service hours donated to the organization
- Growth in attendance, program revenues, or program offerings
- Demographics of consumers
- Meeting agreed upon program/project goals
Public Record

All organizations applying for support should recognize that State of Florida laws stipulate that any correspondence or applications received by the City of Winter Park are subject to public records requests.

Submit complete applications to:
Community Redevelopment Agency
ATTN: Organizational Support Grant
401 Park Avenue South
Winter Park, FL 32789

For more information please contact:

Kyle Dudgeon
Economic Development/CRA Program Manager
407-599-3217
kdudgeon@cityofwinterpark.org
## I. COVER SHEET & AUTHORIZATION PAGE

<table>
<thead>
<tr>
<th>Legal Name of Organization:</th>
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<tr>
<td>DBA:</td>
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<tr>
<td>Mailing Address:</td>
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<tr>
<td>CEO/President:</td>
<td>Email:</td>
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<td>Telephone:</td>
<td>Fax</td>
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<tr>
<td>Contact Person:</td>
<td>Title:</td>
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<td>Email:</td>
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<tr>
<td>Federal ID #:</td>
<td>501(c)(3)#:</td>
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<tr>
<td>Website:</td>
<td></td>
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<tr>
<td>Title of Program Requesting Funding:</td>
<td>Amount Requested:</td>
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</table>

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### Authorization

Our signatures certify that to the best of our knowledge the information contained in this proposal is accurate, complete and consistent with our organization’s Mission, Articles of Incorporation and By-Laws and that we have the legal authority to sign below. Florida has a very broad public records law. As a result, upon request, unless otherwise exempt, any written communication created or received by City of Winter Park officials and employees will be made available to the public and media. Furthermore, under Florida law, email addresses are public records.

---

**Board Chairperson (print)**

**Director/CEO/President (print)**

**Board Chairperson (sign)**

**Director/CEO/President (sign)**

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<th>Date</th>
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II. ORGANIZATIONAL OVERVIEW

Instructions: Use the space below or as an attachment, please provide the following:

1. Organization’s History and Mission Statement: Provide a brief organization history and mission statement that includes organization’s goals and objectives, service area, and location. Include proof of corporate status / 501 (C)(3) Determination Letter from the IRS (Not to exceed 1 page).

2. Major Organization Activities and Accomplishments during the Past Year: Provide information on major activities such as special events and organization/program achievements. (Not to exceed ½ page)

3. Organization Partnerships and/or Collaborations: List any organizations with which your organization has partnerships and/or collaborations and attach any partnership agreements, letters or MOUs to this application.
III. USE OF FUNDS

1. **Funding Description:** Provide a description of the program that funds are being requested for, including demographic that is being served, number expected to be served, and benefit to be derived by the community. If a project or program already exists and is funded without public dollars, explain how additional funds will improve/increase existing programs/projects. *(May attach supporting documentation as necessary.)*

2. **Need for Public Funding:** Identify how the program supports the mission of the CRA.

3. **Program Budget:** Please include a copy of the proposed budget for the program identifying funding sources and expenditures. Be sure to identify what expenses a CRA grant would be used for. Budget should be for the year funding is requested.

4. **Program History:** If the program was administered in prior years, include results from the most recent year. These should include financial and demographical information that reflects the program’s outcome.

5. **Marketing:** Description of how CRA sponsorship, if granted, will be publicly acknowledged (i.e. logo to be used on printed materials, CRA logo placed on website, etc.)
HOME RENOVATION PROGRAM GUIDELINES

The Community Redevelopment Agency (CRA) of the City of Winter Park has developed a forgivable zero-interest loan program to qualified homeowners to help improve neighborhoods, bring dwellings into compliance with applicable adopted housing standards, reduce future maintenance costs, preserve decent affordable owner-occupied housing, and to eliminate threatening health and safety-related property conditions of dwellings located in the CRA District.

This program is designed to provide a zero-interest ten (10) year forgivable loan to income-qualified homeowners of owner-occupied single-family homes whose property is in need of improvements. The homeowner will be required to maintain the property in a condition acceptable to the City. This program is intended to be for capital improvements and is not to be responsible for minor maintenance.

Program applications will become available on October 1 as funds are available. Applicants must submit a complete application by March 1. Applications will be prioritized using the following categories:
1. Health and Safety
2. Code Violations
3. New Applicants

ELIGIBILITY REQUIREMENTS

- The home must be located in the CRA district (see map)
- Must meet Orange County’s Income guidelines for very-low income
- Property must be current on all taxes and liens
- Property must have homeowners insurance
- Property must not have had prior rehab assistance under City of Winter Park rehabilitation programs within the last ten (10) years

INCOME LIMITS (adjusted by household size) Household must meet the Orange County Income Limit Guidelines for low income (80% AMI) or below. The income limits are as follows:

<table>
<thead>
<tr>
<th>Household Size</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Very Low Income</td>
<td>$20,100</td>
<td>$22,950</td>
<td>$25,800</td>
<td>$28,650</td>
<td>$30,950</td>
<td>$33,250</td>
<td>$35,550</td>
<td>$37,850</td>
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</table>
ELIGIBLE IMPROVEMENTS

The housing rehabilitation program assists homeowners in correcting health and safety hazards, code violations, and making other repairs to the exterior of the home. Eligible improvements may include:

- Exterior painting
- Exterior Lighting
- Replacing windows
- Weather stripping
- Roof system repair
- Foundation repairs
- Handicap accessibility improvements
- Termite treatments (initial treatment only)
- Environmental—lead/mold correction
- Fence Upgrades
- Tree trimming and/or removal (only if deemed an immediate safety issue by City)
- Sewer and Septic – connection fees
- Replacing exterior doors and screens
- Carport to Garage conversions
- Driveway installation/replacement
- And any other exterior health, safety and code violation improvements deemed necessary by CRA Staff

All repairs provided under this program will be completed by a contractor and will be covered by a one-year guarantee period, with the exception of a roof repair which has a three year guarantee period. Applicants will be referred to Orange County if more work is needed other than what the Housing Rehabilitation Program can offer.

The city has the discretion to prioritize the improvements based on severity of health and safety property conditions as well as severity of Code Enforcement violations. The city reserves final right to approve or disapprove of qualifying repairs and replacements. Final inspections on all work will be performed and approved by city building inspectors.

PROCESS AND TIMEFRAME – An inspection of the dwelling unit will be performed by city staff in order to determine minimum rehabilitation requirements and prepare an itemized scope of the needed improvements.

Once scope is determined, a contract will be signed between homeowner, contractor, and CRA. Upon contract signing, the contractor will have seven (7) days to acquire permits and thirty-five (35) days to complete the contracted repairs and improvements. An extension will be given to the contractor only if the contractor experiences a manufacturer’s delay of materials ordered for the job. Regular inspections will be made by staff and a city inspector to coordinate and direct the work of the contractor. Homeowners are to make all reasonable effort to allow access to the property so work can be completed in a timely manner. It is the responsibility of the homeowner to move/relocate all furniture. The homeowner is also responsible for the cleaning and additional maintenance supplies once the project has been completed. The contractor will not move any furniture or provide maintenance supplies.

The loan agreement entered into by the homeowner in the contract will be forgiven after ten (10) years of continuous residence. If the homeowner chooses to sell the property within this period, the homeowner will incur a 10% prorated repayment penalty of the value of loan for each year remaining in the loan term. If the home ownership passes to another relative, that person must also meet the income limit guidelines or be subject to repayment.
HOME MAINTENANCE TRAINING AND REPAIR PROGRAM – Applicants must attend a scheduled Home Maintenance class. The Home Maintenance Training and Repair Program will provide hands-on training designed to teach homeowners how to maintain and repair their homes. City Staff will notify applicants of scheduled class times. This program is in collaboration with Habitat for Humanity of Winter Park.

COMMUNITY SERVICE - Community service of two (2) hours for every $500.00 of grant money awarded will be required. **Homeowner, or representative, must complete ten (10) hours of community service prior to the start of home rehabilitation.** The CRA will not commence any rehabilitation work if homeowner or representative has not completed the initial service hours. Community service work must benefit the CRA district and may be served through churches, nonprofit organizations and the City of Winter Park Public Library. Initial service hours will be deducted from required total service hour amount.

PROGRAM REUSE - A property that has participated in a Winter Park housing rehabilitation program may not reapply for future assistance for a period of ten (10) years. Homeowners will be able to submit new applications after the ten (10) year term limitation. Exceptions will be made for emergencies where households with homeowner’s insurance are unable to pay the deductible (ex. Hurricane causes severe roof damage).

PROGRAM FUNDS AVAILABILITY - Due to the uncertain nature of budget availability in any given year and the uncertainty of future grant awards, the CRA cannot guarantee that funding will be available in future years for home rehabilitation. In no way will the CRA be required to offer funding for any home rehabilitation work outside of officially established funds budgeted specifically for the program.
Date ______________________

Applicant Name ____________________________  SS# ________________________

Co-Applicant Name ____________________________  SS# ________________________

Address ___________________________________________________________ Winter Park, FL 32789

Home Phone # ____________________________  Work Phone # ____________________________  Cell Phone # ____________________________

E-mail ____________________________________________________________

Is your property located within the CRA district of Winter Park? (see map)  ○ Yes  ○ No

Please check one of the race categories that best describes your household (optional)

□ American Indian / Alaska Native  □ Hispanic / Latino
□ Asian  □ White / Caucasian
□ Black / African American  □ Other ____________________________

Additional Household Information (optional, check all that apply)

□ Single Parent  □ Single / Non-Elderly
□ Two-Parent  □ Elderly (62+ years)
□ Female Head of Household  □ Person(s) with a Disability

Household Size - Complete the following information for all persons living in the home. Use separate sheet if necessary.

<table>
<thead>
<tr>
<th>Name</th>
<th>M / F</th>
<th>Age</th>
<th>Relationship</th>
<th>Social Security #</th>
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Page 1 of 3
Household Income Information - List all income earners and the source of income for all persons residing in your home. All incomes must be listed for persons over 18 years of age or proof if full-time student.

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gross Monthly Income</th>
<th>Income Source</th>
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Size of Home: My house has _______ bedrooms and _______ bathrooms

Proposed Improvements - Check the item boxes that need improvement. The CRA reserves final right to approve or disapprove qualifying repairs and replacements.

- [ ] Correct Exterior Cited Code Violations
- [ ] Exterior Doors/Windows/ Screens
- [ ] Handicap Accessibility Improvements
- [ ] Exterior Paint/Stucco/Siding
- [ ] Roof Repair
- [ ] Carport to Garage Conversions
- [ ] Exterior Wall/Foundation Repairs
- [ ] Other: ____________________________

Previous Participation - Please note, homeowners who have previously participated in the program within the last ten (10) years are not eligible to apply unless an emergency exists that creates a health or safety problem (see guidelines for details).

Have you ever participated in the CRA's Home Renovation Grant Program?  ○ Yes  ○ No  Date: ____________

Have you ever participated in Orange County's Housing Rehabilitation Program?  ○ Yes  ○ No  Date: ____________

NOTE: Applicant(s) may not apply or participate in the Home Renovation Grant Program and the Driveway Grant Program within the same fiscal year.

Photograph Release Statement- The CRA has my permission to use photographs of me and/or my home in presentations and publications in conjunction with the City's Housing Rehabilitation Program. Initials: ____________________

Applicant's Declaration: I/We declare under penalty of perjury, that the above statements are true and correct. I/We consent to the physical inspection(s) of the premises to process this application. I/We understand that the enrollment and qualification process may impose additional conditions and limitations on my property. The CRA reserves the right to change programmatic priorities without notification. I/We agree to provide additional descriptive, financial, and/or other information upon request by the City. I/We understand that the grants are available in limited quantities and selection is based on the criteria listed on the Housing Rehabilitation Program guidelines. I/We have received, reviewed and understand the program rules, limitations, and the homeowner obligations listed in the program guidelines.

Applicant's Signature: ____________________ Date: ____________ Co-Applicant's Signature: ____________________ Date: ____________

FOR OFFICE USE ONLY: Date Application Received ____________ Application Reviewed By ____________ Income Level: VL __ L __

Number of persons in HH __ HH Monthly Income $ __ HH Annual Income $ __ Is income within HRP guidelines? Yes No

Eligible ____________ Date Notified: ____________ Volunteer hours completed? Yes No  Wait Listed ____________ date: ____________

Ineligible ____________ (reason: ____________)
Home Renovation Program Application Checklist

Before submitting the application, please ensure that you have completed and provided the following:

☐ Completed loan application

☐ Copy of photo identification for both the applicant and co-applicant *(drivers’ license, state ID, or passport)*

☐ Copy of the last two (2) year’s tax returns for every working member of the household over the age of 18. *(last three (3) years’ returns required if self-employed)*

☐ Provide the last three (3) paystubs for each working member of the household over the age of 18.

☐ Copy of verification of any other sources of earned and/or unearned income for all members of the household *(social security award letter, unemployment form, pensions, etc.)*

☐ Copy of the last three (3) complete bank statements for all members of the household *(checking, savings, 401K, CDs, money market accounts, etc.)*

☐ Copy of current mortgage statement

☐ Proof of home ownership *(warranty deed, quit-claim deed, etc.)* Or authorization from Property Owner

☐ Proof of homeowner’s insurance *(declaration page)*

☐ Signed employment verification form or unemployment affidavit *(if applicable)*

☐ Signed current income statement form

☐ Signed and notarized Home Renovation Affidavit

Please submit completed applications to:

City of Winter Park
Community Redevelopment Agency
401 S. Park Ave
Winter Park, Florida 32789

ONCE APPROVED, THE HOMEOWNER, OR REPRESENTATIVE, MUST COMPLETE TEN (10) HOURS COMMUNITY SERVICE PRIOR TO THE START OF THE HOME RENOVATION. THE CRA WILL NOT AWARD ANY RENOVATION FUNDS IF HOME OWNER HAS NOT FULFILLED THIS REQUIREMENT.
Home Renovation Program
Employment Verification

Homeowner: _________________________________
Address: __________________________________Winter Park, FL 32789

Dear Sir/Madam,

The above mentioned homeowner has applied for funds for the purpose of rehabilitating their property. In order to qualify for the program, the Community Redevelopment Agency requires confirmation of the homeowner's income. Please complete the following information:

A. Company's name: _________________________________
B. Position held: ____________________________________
C. Dates of employment: _____________________________
D. Rate of pay: Annually $________________ Hourly $__________
E. Hours worked per week: _____________________________
F. Additional compensation, overtime: ___________________
G. Probability of continued employment: ________________
H. Additional Comments: _________________________________

____________________________________________________

Please return completed form to:
Community Redevelopment Agency
401 S. Park Avenue
Winter Park, Florida 32789

The above information will be treated confidentially. Thank you.

Signature of Employer _______________ Date _______________

I, ________________________________, hereby authorize release of the above requested information:

____________________________________________________

Signature of Applicant _______________ Date _______________
Home Renovation Program  
AFFIDAVIT

Applicant(s) Name(s): ________________________________________________

Property Address: ________________________________, Winter Park, FL 32789

I/We do hereby request the Community Redevelopment Agency Home Renovation Program (“the CRA program”) to process the application for Exterior Home improvements to above property.

I/We further authorize the CRA Program to make inquiries and verification of all assets, income, employment, mortgage, credit reports, title search and any other information necessary to determine the eligibility of the applicant.

I/We will hold harmless the CRA Program with respect to all claims and damages caused by inquiries necessary to determine the eligibility of the applicant(s).

It is understood that any information obtained shall be for the confidential use of the CRA Program and the United States Department of Housing and Urban Development.

It is further understood that the applicant(s) shall not incur or be obligated for any cost of this introductory application.

I/We certify that I am/we are the owner[s] of the above property OR that I/We have authorization from property owner(s) and have disclosed all assets and income as a requisite to determine ability to finance repairs and improvements.

I/We further certify that I/we are unable to secure necessary funds from other sources upon comparable terms and conditions.

I/We certify that I/we ___ are ___ are not presently employed but I/We ___ do ___ do not anticipate becoming employed within the next twelve (12) months. Based on my past work experience and income history, I would anticipate to earn $__________ per year if I/We were to become employed.

I/We understand that I/we must complete ten (10) hours of community service prior to the start of home rehabilitation.

I/We understand that I/we need to make all reasonable efforts to allow access to the property so work can be completed in a timely manner. In the event we cannot provide access, the Community Redevelopment Agency has the ability to cancel the application and revoke allocated funds.

I/We understand that it is my/our responsibility to move/rearrange furniture in order to provide complete access and it is my/our responsibility to clean up after the rehabilitation has been completed.

Signature of Applicant ___________________________ Signature of Co-Applicant ___________________________ Date __________

Signature of Notary ___________________________ [NOTARY SEAL] ___________________________ Date __________
COMMUNITY REDEVELOPMENT AGENCY
COMMUNITY SERVICE LIST

1. Winter Park Library
   • Taking children, youth and seniors to the Library
   • Community Relations Office - MaryGail Coffee – (407)- 623-3486

2. Winter Park Community Center
   • Contact Parks & Recreation (407)-599-3357

3. DePugh Nursing Home
   • Contact: (407) 644-6634

4. Center for Independent Living
   • Contact: (407) 623-1070

5. Seniors First
   • Located at the Community Center
   • Contact: (407) 645-0301

6. Welbourne Day Nursery
   • Will charge for background check
   • Contact: (407) 644-5885

7. Habitat For Humanity
   • Contact: (407) 645-4408

8. Hannibal Square Heritage Center
   • Contact: (407) 539-2680

The Home Renovation Program allows recipients to perform the required community service hours in any non-profit organization within the City of Winter Park. For further information about any of the above locations, please contact the CRA Coordinator at 407-643-1657.
VOLUNTEER TIMESHEET
City of Winter Park Home Renovation Program

Volunteer Name: __________________________________________
Volunteer Address: ________________________________________
Service Organization: ______________________________________
Address: ________________________________________________
Phone No.: ______________________________________________
Supervisor Name: _________________________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Type of Service</th>
<th>Hours Worked</th>
<th>Signature of Supervisor</th>
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Volunteer Community Service work must benefit the district and must be approved by Staff of the City of Winter Park. The volunteer and the service organization understand and agree that the City of Winter Park has no liability for any personal injury or property damage in any way arising out of or relating to the volunteer community service work and further hereby agree to indemnify and hold harmless the CRA and the City from the same. The undersigned attest the above reported hours are correct.

Volunteer Signature __________________________________________

Service Organization Supervisor Signature ________________________
TO QUALIFY FOR THIS GRANT PROGRAM:
1. You must currently reside at the property
2. The property must be within the CRA limits
3. Property taxes must be current
4. Property must not have any outstanding code violations

NOTE: Applications will be reviewed and approved on a first come first serve basis, and shall be based on criteria noted in Section D of the grant requirements attached to this application.

Property Owner(s) Name(s):

Property Address: Winter Park, FL 32789

Home Phone: Cell Phone:

Email:

Applicant Signature: Application Date:

A. Purpose:
The intention of this grant program is to enhance the current housing within the CRA neighborhoods through installation of a new driveway or replacement and/or repair of existing driveways currently made of gravel, mulch, in a state of disrepair with new brushed concrete or other material as approved by CRA Staff.

B. Funding:
Base funding and Administration for this grant is provided by City of Winter Park’s CRA. Funding shall be on a first come first serve basis, based on the criteria noted in Section D.

C. Approval:
The CRA will consider applications concerning funding and will determine compliance with the program goals. NOTE: Only one driveway grant per property is allowed.

D. Criteria:
1. Property owner and/or current Resident may apply for funding up to a maximum of $5,000.00.
2. Applicant will be responsible for any costs in excess of $5,000.00.
3. Property owner must be current on their property taxes and have no outstanding code violations.
4. Property owner must be willing to sign the Affidavit included in this application.

E. Process:
1. Completed application along with all supporting documentation is submitted to the CRA Staff.
2. Applications will be reviewed and ranked by a ‘Review Committee’ comprised of two (2) members of City Staff and one (1) City approved contractor.
3. If approved:
   - Work will be scheduled by CRA Staff in conjunction with applicant.
   - Driveway approach inspection will be completed prior to driveway construction begins.
   - Driveway construction will commence and must conform to current use and meet all Code requirements.
   - Driveway inspection will be performed by City Inspector upon completion.

NOTE: Applicant(s) may not apply or participate in the Home Renovation Grant Program and the Driveway Grant Program within the same fiscal year.

PLEASE RETURN COMPLETED APPLICATION AND SUPPORTING DOCUMENTS TO:

CITY OF WINTER PARK CRA
ATTN: RESIDENTIAL DRIVEWAY GRANT
401 S. PARK AVE
WINTER PARK, FL 32789

For further information, please contact:

Laura Neudorffer
CRA Coordinator
407-643-1657
lneudorffer@cityofwinterpark.org
RESIDENTIAL DRIVEWAY GRANT AFFIDAVIT

Owner(s) Name: ___________________________________________
Property Address: _________________________________________

I/We do hereby request the Community Redevelopment Agency Residential Driveway Grant Program to process the application for driveway installation/repair/improvements to above property.

I/We further authorize the Community Redevelopment Agency Residential Driveway Grant Program to make inquiries and verification of all assets, income, employment, mortgage, credit reports, title search and any other information necessary to determine the eligibility of the applicant.

I/We will hold harmless the Community Redevelopment Agency Residential Driveway Grant Program with respect to all claims and damages caused by inquiries necessary to determine the eligibility of the applicant(s).

It is understood that any information obtained shall be for the confidential use of the Community Redevelopment Agency Residential Driveway Grant Program.

It is further understood that the applicant(s) shall only incur or be obligated for any cost(s) in excess of the Grant maximum of $3,000.

I/We certify that I/we currently reside at the above property.

I/We further certify that I/we are unable to secure necessary funds from other sources upon comparable terms and conditions.

I/We understand that I/we must complete four (4) hours of community service prior to the start of driveway improvement.

I/We understand that I/we need to make all reasonable efforts to allow access to the property so work can be completed in a timely manner. In the event we cannot provide access, the Community Redevelopment Agency has the ability to cancel the application and revoke allocated funds.

__________________________________________  __________________________________________  _____________
Signature of Applicant                          Signature of Co-Applicant                          Date

__________________________________________
Witness

Date

Staff Use Only: Application Approved ( Y / N ) Date: ___________________ By: ___________________
TO QUALIFY FOR THIS GRANT PROGRAM:
1. You must currently reside at the property
2. The property must be located within the CRA limits
3. Property taxes must be current
4. Property must not have any outstanding code violations

NOTE: Applications will be reviewed and approved on a first come first serve basis, and shall be based on criteria noted in Section D of the grant requirements attached to this application.

Property Owner(s) Name(s): Winter Park, FL 32789
Property Address:
Home Phone:
Cell Phone:
Email:
Applicant Signature:
Application Date:

A. Purpose:
The intention of this grant program is to enhance the current housing within the CRA neighborhoods through providing professional contractors to apply new exterior paint.

B. Funding:
Base funding and administration for this grant is provided by City of Winter Park’s CRA. Funding shall be on a first come first serve basis, based on the criteria noted in Section D.

C. Approval:
The CRA will consider applications concerning funding and will determine compliance with the program goals. NOTE: Only one paint grant per property owner is allowed. Applicants may only apply once every (5) five years.

D. Criteria:
1. Property Owner and/or current Resident must purchase paint for the property.
2. Property owner and/or current Resident may apply for funding up to a maximum of $1,000.00.
3. Applicant will be responsible for any costs in excess of $1,000.00 or approved grant funding.
4. Property owner must be current on their property taxes and have no outstanding code violations.
5. Property owner must be willing to sign the Affidavit included in this application.

E. Process:
1. Completed application along with all supporting documentation is submitted to the CRA Staff.
2. CRA Staff will review application for completeness and eligibility
3. If approved, professional services will be scheduled by CRA Staff in conjunction with the applicant

NOTE: Applicant(s) may not apply or participate in the Home Renovation Grant Program and the Paint Grant Program within the same fiscal year.

PLEASE RETURN COMPLETED APPLICATION AND SUPPORTING DOCUMENTS TO:

CITY OF WINTER PARK CRA
ATTN: LAURA NEUDORFER
401 S. PARK AVE
WINTER PARK, FL 32789

For further information, please contact:

Laura Neudorffer
CRA Coordinator
407-643-1657
lneudorffer@cityofwinterpark.org
RESIDENTIAL PAINT PROGRAM AFFIDAVIT

Owner(s) Name: ___________________________________________________________
Property Address: __________________________________________________________

I/We do hereby request the Community Redevelopment Agency Residential Paint Grant
Program to process the application for professional painting services to above property.

I/We further authorize the Community Redevelopment Agency Residential Paint Grant
Program to make inquiries to determine the eligibility of the applicant.

I/We will hold harmless the Community Redevelopment Agency Residential Paint Grant
Program with respect to all claims and damages caused by inquiries necessary to determine the
eligibility of the applicant(s).

It is understood that any information obtained shall be for the confidential use of the
Community Redevelopment Agency Paint Only Grant.

It is further understood that the applicant(s) shall not incur or be obligated for any cost of
this introductory application.

I/We certify that I/we currently reside at the above property.

I/We further certify that I/we are unable to secure necessary funds from other sources
upon comparable terms and conditions.

I/We understand that I/we need to make all reasonable efforts to allow access to the
property so work can be completed in a timely manner. In the event we cannot provide
access, the Community Redevelopment Agency has the ability to cancel the application and
revoke allocated funds.

_________________________________  _______________________________  _________
Signature of Applicant                Signature of Co-Applicant              Date

_________________________________  _______________________________
Witness                                Date

Staff Use Only: Application Approved ( Y / N ) Date: ___________________ By: ___________________