

**Downtown West Bend
SIGN GRANT APPLICATION**

Date: _____

Business name: _____

Applicant's name: _____

Business address: _____

City State ZIP: _____

Phone: daytime: _____ evening: _____

Email: _____

List the sign company(ies) or professional graphic artist(s) to be used with this project:

Business name: _____

Business address: _____

City State ZIP: _____

Contact Person: _____ Phone: _____

Business name: _____

Business address: _____

City State ZIP: _____

Contact Person: _____ Phone: _____

Total cost of the project: _____

Type of sign proposed:

- _____ Projecting
- _____ Wall
- _____ Ground
- _____ Canopy/Awning

List the cost breakdown by major category (design, materials, labor, etc.).

ITEM	COST
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Proposed start date: _____ Proposed completion date: _____

Owner of the property on which this sign will be mounted: _____

Colors to be used—**specify the PMS** (Pantone Matching Systems): _____

Please attach the following to this application:

- 1) **Two color copies of the proposed project design.**
- 2) **Fabric swatches, if the proposed sign is an awning.**

The undersigned applicant(s) affirms that:

The information submitted here is true and accurate to the best of my (our) knowledge. I (We) have read and understand the conditions of the Downtown West Bend Association’s Sign Grant Program and agree to abide by its conditions and guidelines.

Signed: _____ Date: _____

Signed: _____ Date: _____

For Office Use Only

Date: _____

Approved _____ Amount of Grant _____ Denied _____