

CITY OF VALPARAISO

166 Lincolnway Valparaiso, IN 46383 219-462-1161 phone 219-464-4273 fax www.valpo.us

Date Received:	
Date Approved:	
Date Completed:	

VALPARAISO DOWNTOWN FIRE SAFETY GRANT PROGRAM

Application Form

1. Applicant information		
NAME:		
ADDRESS OF PROPERTY TO BE IMPROVED:		
NAME OF BUSINESS:		
TAX ID#/SOCIAL SECURITY #:		
HOME ADDRESS:		
BUSINESS PHONE:	HOME PHONE:	
FAX:	EMAIL:	
2. Project Information		
BUILDING LOCATION:		
BUSINESS(ES) LOCATED IN BUILDING:		
BUILDING AGE:		
BUILDING ZONED AS:		
OWNER:		_
IF LEASED: Lease Expires		

3. Project Description

	Describe in detail the proposed scope of w professional and/or contractor(s) selected. registered with the City of Valparaiso. Us necessary.	All contractors must be
	Construction Completion Date: Total Pr	oject Cost:
he State of All work mu Fo be eligib	ermit is required. In addition, it may be nece Indiana to obtain a Construction Design Rele st be constructed or installed per State of Ind le for the grant, no portion of the building sha 34 of the Indiana Building Code (Existing Stru	ease prior to beginning project. diana Building and Fire Codes. all be designed to the provisions
Building per	rmit submittal must include detailed plans and	d complete list of contractors.
4. Build	ding Information	
Will project	result in a change of use for the building? Y	′ES NO
Jses of the	building after completion of the project:	
I st Floor:		Total SF:
2 nd Floor:		Total SF:
3 rd Floor:		_ Total SF:
Other:		Total SE:

5. Other Required Documentation

- a. Property deed with legal description of property
- b. Proof that all property taxes are paid and current
- c. Proof of property and liability insurance
- d. Copies of any leases associated with property
- e. Project budget
- f. Two (2)-contractor quotes/construction bids for total project