

**COMMERCIAL PROPERTY IMPROVEMENT PROGRAM**

**APPLICATION 2024**

**1. OWNER/APPLICANT INFORMATION**

Name of Owner: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

\_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email address: \_\_\_\_\_

**2. PROPERTY INFORMATION**

Retail Center Name \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Property Tax ID: \_\_\_\_\_

Size of Shopping Center/Retail Property: \_\_\_\_\_

Percent of square footage currently vacant: \_\_\_\_\_

Anchor tenant(s): \_\_\_\_\_

Lease expiration date for anchor tenant(s): \_\_\_\_\_

Year built: \_\_\_\_\_: How long have you owned property \_\_\_\_\_?

Year of most recent renovation/upgrade: \_\_\_\_\_

\_\_\_\_\_

Council Member District Representative \_\_\_\_\_?

What district number is the property located \_\_\_\_\_?

Describe recent improvements below:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Are all mortgages on property current? \_\_\_\_\_ Yes \_\_\_\_\_ No

Status of County Tax obligations: \_\_\_\_\_ Paid \_\_\_\_\_ Delinquent.

Outstanding code violations: \_\_\_\_\_ Yes \_\_\_\_\_ No

### 3. IMPROVEMENTS

*Select at least 3 from the list below*

\_\_\_\_\_ Redesign and construction of storefront façade.

\_\_\_\_\_ Upgrade of major building systems to increase energy efficiency.

\_\_\_\_\_ Replacement or repair of cornice, parapets and other

architectural features.

\_\_\_\_\_ Replacement of doors and windows on front façade of property.

\_\_\_\_\_ Installation or upgrading of exterior lighting.

\_\_\_\_\_ Installation or improvement of signage.

\_\_\_\_\_ Installation or replacement of awnings or canopies.

\_\_\_\_\_ Exterior painting or repointing of brick.

\_\_\_\_\_ Installation of art and landscape features.

\_\_\_\_\_ Parking lot improvements: repaving/resurfacing/restriping

\_\_\_\_\_ Roof replacement

Please attach a summary specifically describing the nature of the project, improvements, and timetable for completing the proposed improvements.

Project Architect (if identified): \_\_\_\_\_

Do you want conceptual design services from NDC: \_\_\_\_\_ Yes \_\_\_\_\_ No

Building Permit (s) will be needed: \_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please provide certification below from DPIE that building permits will not be needed for the proposed scope of work.

DPIE Reviewer Certification: \_\_\_\_\_

Please note, if any of the above items are missing in section **(5)** of the required documents, your submission will not be considered .

**4. IMPROVEMENTS FINANCING**

Total Project Cost: \_\_\_\_\_

Applicant's Contribution: \_\_\_\_\_

CPIP Matching Grant Request \_\_\_\_\_

How will applicant's portion of the project be financed?

\_\_\_\_\_

\_\_\_\_\_

Please note that both CPIP Matching Grant is disbursed on a reimbursable basis after work is completed, inspected, paid for and contractor lien release provided. In addition, CPIP Matching Grant will be disbursed upon verification of applicant's matching expenditure.

**5. REQUIRED APPLICATION SUBMISSIONS**

- A. Proof of property ownership.
- B. Color photographs of the existing property exterior and area to be improved.
- C. Sketches or conceptual drawings of the anticipated exterior improvements.
- D. A legal description of the property.
- E. List of current tenants.
- F. Documentation from all lending institutions verifying all mortgage payments on the property are current.
- G. Documentation demonstrating that all County taxes are current.
- H. Proof of certificate of Good Standing

**6. CERTIFICATION**

All owners authorized corporate officers, or partners must sign this application.

We have read, understand, and accept the CPIP Program Guidelines and Application requirements. The information contained in this application is accurate to the best of my knowledge. Applicants understand that business and/or property information may be requested pursuant to this application and hereby give consent for such information to be provided. The Redevelopment Authority of Prince George’s County retains the sole right to make the decision regarding the approval, denial, or modification of this application.

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Name (Print)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Signature

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Date

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Date