

2025

Norwich Building Tomorrow Foundation
Curb Appeal Grant Refund Application

Owner/Applicant Information

Name of Property Owner: _____

Mailing Address: _____

Contact Information: Phone: _____ Email: _____

Name of Applicant (if different than owner): _____

Mailing Address: _____

Contact Information: Phone: _____ Email: _____

Property Information

Address of Property: _____, Norwich, New York.

Description of Completed Project (Briefly describe the completed project and the materials used)

Project Cost

Total Project Cost: _____ Requested Grant (75% of Project Cost, \$15,000 max): _____

If the project costs/anticipated grant refund is different than what you applied for, please provide details on back.

Attachments The following information must be submitted with this application.

Before and after photographs* of the property are preferred. Invoices and all documentation indicating project costs are required for grant reimbursement. *Photos become the property of the Foundation and may be used for future promotional purposes.

Signature

The undersigned certifies the information in and attached to this application is true and accurate; and hereby request the FOMDDC to reimburse the grant applicant under the terms allowed for the project described above.

APPLICANT: _____ DATE: _____

OWNER: _____ DATE: _____

Submit to: Pegi LoPresti, CAP Coordinator, 8722 N. Entry Rd., Baldwinsville, NY 13027 – norwichcap@gmail.com