

**South Florida Avenue  
Façade Improvement Application  
Dixieland Community Redevelopment Area: Commercial Corridor**

**Prior to completion of this application, please contact the CRA Coordinator to review this process at (863)834-6011 or tamara.sakagawa@lakelandgov.net.**

Date \_\_\_\_\_

**Community Redevelopment Agency  
228 South Massachusetts Avenue  
Lakeland, Florida 33801**

**Name and Type of Business** \_\_\_\_\_

**Location of Business** \_\_\_\_\_  
(Street address, name of building if applicable)

**Property Owner** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Contact (if different from owner)** \_\_\_\_\_

**Email Address** \_\_\_\_\_

**Property Owner Mailing Address** \_\_\_\_\_

*The Façade Improvement Matching Grant is a \$5,000 dollar-for-dollar matching grant that can be used towards any exterior architectural improvements to the street-side façade. For properties with two street-front facades or a second, prominently visible façade, the second façade may be eligible for a \$2,500 matching grant.*

**Estimated number of linear feet facing a public-right-of-way: \_\_\_\_\_ (If the building faces onto more than one street, such as a building located on a corner, give the estimated frontage feet of the secondary façade \_\_\_\_\_)**

**Requested Grant Amount \$ \_\_\_\_\_**

**General description of proposed improvement:**

**Façade**       **Awnings/Canopies**       **Signs**       **Walls/Fencing/Landscaping**

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**Community Redevelopment Coordinator, Staff use only**

Date of initial contact: \_\_\_\_\_  *Electronic submission*       *In person*

Staff representative: \_\_\_\_\_

Design Professional: \_\_\_\_\_

*Pre-Application Meeting*       *Post-Application Meeting*

CRA Advisory Board:     *Approved*     *Denied*    Date \_\_\_\_\_

Property Site File Number \_\_\_\_\_

**Proposed Scope of Work:**

Please provide a brief, general description of the work to be performed, materials to be used, color and material samples (if applicable).

**Exterior Walls** (Includes front facade, second façade (if applicable), structural, decorative and non-functional elements) \_\_\_\_\_

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**Windows/Doors** \_\_\_\_\_

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**Awnings/Canopies** \_\_\_\_\_

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**Walls/Fencing/Landscaping** \_\_\_\_\_

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**Painting** \_\_\_\_\_

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**Signage** \_\_\_\_\_

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**Other** \_\_\_\_\_

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**Attachments:** The following attachments are required:

- Project schedule.
- Photographs of the existing building and proposed project area.
- Schematic drawings illustrating proposed work, or pictures with project description outlines.
- Certificate of Review from the Historic Preservation Board.
- Three (3) cost estimates.

**Signature of Owner** \_\_\_\_\_