



**EL PASO DOWNTOWN MANAGEMENT DISTRICT (DMD)  
PEDESTRIAN CORRIDOR IMPROVEMENT GRANT PROGRAM  
APPLICATION**

**201 E. Main Dr., Suite 107  
El Paso, TX 79901  
915-400-2294**

**I. APPLICANT / AGREEMENT PARTICIPANT:** \_\_\_\_\_  
(responsible for payment of all project / improvement costs)

**II. CONTACT INFORMATION**

PROPERTY OWNER(S): \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 E-MAIL ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_  
 REPRESENTATIVE(S)/TENANT(S): \_\_\_\_\_  
 ADDRESS: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_ PHONE: \_\_\_\_\_  
 E-MAIL ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_  
 PREVIOUSLY APPROVED TO RECEIVE GRANT PROGRAM FUNDS: YES \_\_\_ NO \_\_\_  
 IF YES, WAS PROJECT COMPLETED IN ACCORDANCE WITH THE GRANT AGREEMENT: YES \_\_\_ NO \_\_\_

**III. PROJECT INFORMATION**

**A. PROPERTY ADDRESS:** \_\_\_\_\_  
**LEGAL DESCRIPTION:** \_\_\_\_\_  
**REAL PROPERTY TAX ACCOUNT No.:** \_\_\_\_\_  
**CURRENT PROPERTY VALUATION:** \_\_\_\_\_  
**PRESENT USE:** \_\_\_\_\_ **PROPOSED USE:** \_\_\_\_\_  
**B. TOTAL SQUARE FOOTAGE:** \_\_\_\_\_  
**BREAKDOWN SQUARE FOOTAGE BY PROPOSED USE (ie: residential, retail, office, etc.):** \_\_\_\_\_  
 \* **ESTIMATED CONSTRUCTION START DATE:** \_\_\_\_\_  
**C. ESTIMATED TOTAL PROJECT / IMPROVEMENT COST (Exhibit A2):** \_\_\_\_\_  
 \_\_\_\_\_  
**PREVIOUS TAX RELIEF GRANTED TO ANY PORTION OF THIS PROPERTY? (If so, describe the type and duration):** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

\* Applications with estimated construction start dates of more than 120 days beyond date of submission may be required to be resubmitted at a later date.

**See Page 2 for Required Documentation to Include with Application**



**REQUIRED DOCUMENTATION FOR APPLICATION (Documentation submission is preferred in electronic format.)**

- APPLICATION FOR ICONIC SIGNAGE & LIGHTING GRANT PROGRAM** - Each item that is included with and is a part of this application shall be complete. All required documentation must be submitted *before* this application is accepted for review processing. Submittal of an application does not constitute acceptance for review processing until the El Paso Downtown Management District (DMD) has determined that the application is accurate and complete.
- HISTORICALLY DESIGNATED PROPERTIES** - If applicable, signed approval certification documentation from the City of El Paso Historic Preservation office.
- PROPERTIES LOCATED WITHIN THE UNION PLAZA DISTRICT** - If applicable, documentation indicating design guideline conformity / approval.
- CONCEPTUAL RENDERING OR CONSTRUCTION DRAWING** - **Exhibit A1** - One (1) *color* drawing copy depicting entire project scope and/or (preferably) one (1) 8 1/2" x 11" color copy of the proposed project / improvement plans / work.
- CERTIFIED CITY TAX CERTIFICATE** - Certified City tax certificates indicating no delinquent balance exists on the property's tax account. City tax certificates may be obtained at the City Tax Assessor/Collector Office, Wells Fargo Plaza, 221 N. Kansas, Suite 300, El Paso, Texas. Note: For property owners with property tax exemption status, provide tax exemption certificate and/or documentation.
- COST ESTIMATES OF PROPOSED PROJECT** - **Exhibit A2** – List each item of work, its detailed description and cost. Separate and provide breakdown of item costs and total for project / improvement work.
- PROOF OF OWNERSHIP** - One (1) copy of a certificate from a title company, warranty deed, or other legal document demonstrating that the individual (s) or entity listed on application is the current property owner.
- PHOTOGRAPHS** - Color photographs showing current conditions of the site and structures relating to the project / improvement work area.

**\*\*OFFICE USE ONLY\*\***

APP NO. \_\_\_\_\_ RECEIVED DATE: \_\_\_/\_\_\_/\_\_\_ ACCEPTED BY: \_\_\_\_\_

REVIEW COMMITTEE DATE: \_\_\_/\_\_\_/\_\_\_ ACTION: \_\_\_\_\_

REVIEW COMMITTEE DATE: \_\_\_/\_\_\_/\_\_\_ ACTION: \_\_\_\_\_

REQUIRED DOCUMENTATION CHECKLIST COMPLETE: YES \_\_\_ NO \_\_\_

**IV. SIGNATURE CERTIFICATION of INFORMATION**

1. OWNER(S) OF RECORD FOR THE ABOVE DESCRIBED PARCEL – Owner agrees and consents to the Project described on this Application and confirms the Applicant’s eligibility as it conforms to The Program Guidelines:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

The State of Texas  
County of \_\_\_\_\_

Before me, a Notary Public, on this day personally appeared \_\_\_\_\_, known to me (or proved to me on the oath of \_\_\_\_\_) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas

2. REPRESENTATIVE / TENANT FOR THE ABOVE DESCRIBED PARCEL:

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_

The State of Texas  
County of \_\_\_\_\_

Before me, a Notary Public, on this day personally appeared \_\_\_\_\_, known to me (or proved to me on the oath of \_\_\_\_\_) to be the person whose name is subscribed to the foregoing instrument and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

Given under my hand and seal of office this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_.

\_\_\_\_\_  
Notary Public, State of Texas

- Note:**
- ***Signatures are required for all owners of record for the property proposed for improvements. Attach additional signatures on a separate sheet of paper.***
  - **All signatures require notary certification.**