



Empire State  
Development



Commercial Building Stabilization Fund

# APPLICATION



Date submitted: \_\_\_\_\_

## APPLICANT INFORMATION

**Property Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Property Owner  
Applicant's Name:**

First \_\_\_\_\_

Last \_\_\_\_\_

**Property Owner  
Applicant's Mailing Address:**

\_\_\_\_\_  
\_\_\_\_\_

**Property Owner  
Applicant's Phone:**

\_\_\_\_\_

**Property Owner  
Applicant's Email:**

\_\_\_\_\_

## PROJECT DESCRIPTION

**Please describe work to be performed under this application and explain how the work proposed will stabilize the property.**

Attach any previously obtained quotes or plans.

Continue to page 2 of the application. \_\_\_\_\_→

**Funding Requested:** \$ \_\_\_\_\_

**Total Estimated Project Budget:** \$ \_\_\_\_\_

**Is there a mortgage on this property?** (Y/N) \_\_\_\_\_

If yes, are the payments current? (Y/N) \_\_\_\_\_

Are there any liens on this property other than the mortgage? (Y/N) \_\_\_\_\_

*Attach a copy of mortgage and any known liens against the property.*

**Are there any known Code Violations or Housing Court Summons on this property?** (Y/N) \_\_\_\_\_

*Attach a copy of mortgage and any known liens against the property.*

**Are all property, water, and sewer taxes up to date?** (Y/N) \_\_\_\_\_

*Attach copy of Property Tax Bill*

**I have read the Program Guidelines with respect to the optional Preservation Easement Program and:**

- I am not interested in participating
- I need more information on the program
- I am willing to participate in the program

**CERTIFICATION**

I certify that all information contained in this application and all information furnished in support of this application is true and complete to the best of my knowledge and belief. I acknowledge I have read the program guidelines for the funding included with this application and agree to all of the terms and conditions contained in the program guidelines.

**Applicant's Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

National Register

Outstanding Code Violations  
*Attach if applicable*

Local Historic District

Current on Taxes/Fees

Contributing Resource

Assessed Valuation

Date Recieved:

\_\_\_\_\_

\_\_\_\_\_

**Other comments:**