

**Downtown Jonesborough
Façade Improvement Grant Program
Reimbursement Form**

Applicant Information

Name of Applicant and Project: _____

Address of Applicant: _____

Telephone number and cell number of Applicant: _____

Email address of Applicant: _____

Address of work: _____

Project Start Date: _____ Project Completion Date: _____

Total Project Cost: \$_____ Total Reimbursement Requested: \$_____

Required Attachments Checklist:

- ☐ Completed reimbursement form.
- ☐ Photographs of completed work.
- ☐ Itemized list of expenditures.
- ☐ Copies of all invoices and all receipts and/or canceled checks as proof that materials and contracted improvements have been paid. Include name, address, phone number(s) of contractor(s).
- ☐ Statements certifying that all the suppliers and contractors have been paid.
- ☐ Satisfactory inspection by the Town of Jonesborough Building Official.
- ☐ Satisfactory inspection by the TOJ to ensure all work completed conforms to work proposed.

Email Completed Request for Reimbursement to:

Glenn Rosenoff, Town Administrator and Donna Freeman, Executive Assistant

Town of Jonesborough

grosenoff@Jonesboroughtn.org and donnaf@Jonesboroughtn.org

Approval for Reimbursement

Amount approved for reimbursement: \$ _____

Town of Jonesborough Building Official

Date

Historic Zoning Commission Representative

Date

TOJ Approval for Reimbursement Payment

Date