City of Jacksonville Beach, Florida

11 North Third Street
Jacksonville Beach, FL
32250

(904) 247-6100
www.jacksonvillebeach.org

COMMUNITY REDEVELOPMENT AGENCY

FAÇADE BEAUTIFICATION GRANT PROGRAM

Application Packet

Funding is subject to availability.

Applicants must be in good standing with the Community Redevelopment Agency and the City, including a demonstrated history of timely permit acquisition, adherence to approved project timelines, and cooperative engagement during previous projects. Applicants who have caused significant delays, failed to comply with program requirements, or created undue administrative challenges may be deemed ineligible.

In FY2026 – Façade Grant Applications will be reviewed on a QUARTERLY BASIS. Those quarterly review dates for FY2026 will be:

January 26, 2026
April 27, 2026
July 27, 2026
September 28, 2026

(These review dates are subject to change)

Beginning in FY2026 (October 1, 2025), a new reimbursement process will be implemented for all approved façade grants. Upon project completion, applicants must fill out Form G2, included in the application packet, and submit it to City staff to initiate the reimbursement process.

Applicants will have sixty (60) days to submit all required documentation, including applicable permits, proof of payment, and any additional verification materials requested by staff. The 60-day period begins upon receipt of one of the following: (1) a final permit sign off from the City's Building Official for projects requiring formal permitting, or (2) a dated letter from City staff confirming that a final inspection has been conducted and the project has met all applicable grant guidelines.

All projects will be subject to a final inspection. For projects that do not require building permits, City staff will conduct the inspection and provide written confirmation with a date that will serve as the official start of the 60-day documentation period.

Failure to submit all required documentation within the 60-day timeframe will result in cancellation of the grant agreement. In such cases, the applicant will forfeit all reimbursement funds and become ineligible for future grant opportunities.

(Please type or print legibly.)

I. APPLICANT INFORMATION

□ OWNER □ TENANT

Name_____ Title _____

Address _____

City _____ State _____ Zip Code _____

Phone Number_____ Alternate Number_____

II. BUSINESS INFORMATION

Name_____ EIN# _____

Owner's Name _____

Property Address _____

City _____ State _____ Zip Code _____

Phone Number_____E-mail_____Website_____

TYPE OF LEGAL ENTITY:

STATE OF INCORPORATION: _____

DATE COMPANY ESTABLISHED: _____

NUMBER OF YEARS IN BUSINESS: _____

( ) Sole Proprietorship ( ) Partnership/Joint Venture
( ) Corporation ( ) Limited Liability Corporation

III. PROJECT INFORMATION

Project Start Date _____
Project End Date _____

Please include a brief project timeline with milestone dates to ensure accountability.

Please submit two itemized quotes from two different vendors for each category of work. This is a non-negotiable requirement to ensure competitive pricing and transparency.

Once a façade grant application has been submitted, no modifications to the submitted quotes will be accepted.

Please note: Vendors submitted to provide services under the façade grant program MUST be in good standing with The Florida Department of Business and Professional Regulation.

Eligible Activity	Description of Improvements	Amount
Painting and Cleaning		**$**
Repair, Replacement, and/or New: • **Awnings/Canopies** • **Cornices** • **Decorative details** • **Doors** • **Entrances Windows**		
Staining and Masonry Repairs		**$**
Signage Installation In compliance with Jacksonville Beach Code		**$**
Decorative Fencing (not chainlink)		**$**
Landscaping Elements		**$**
Permanently affixed exterior lighting		**$**
Mural/Other Exterior Art		**$**
Constructing Fencing for major exterior renovations with pre-approved building rendering		
	Total Project Cost	**$**

Applicants Funding $_____

Total Program Funding Requested $_____

MAXIMUM COMMUNITY REDEVELOPMENT AGENCY FUNDING OF 2:1 RATIO TOTAL PROJECT COSTS NOT TO EXCEED $50,000.00

Please note: in order to maximize the impact of available funding, the CRA may give preference to applications requesting smaller grant amounts, or first-time applicants with comparable scoring.

If multiple applications are considered for the same funding round, preference may be given to businesses or property owners who have not previously received façade grant funding.

IV. SIGNATURES AND PUBLIC INFORMATION DISCLOSURE

Certification: By signing this application, the applicant (applicant, business owner, building owner, tenant, owner group, etc.) affirms they have no outstanding code violations, unpaid fines, or unresolved permitting issues with the City of Jacksonville Beach.

*Please note: If a property or business is owned by a group or multiple individuals, all owners must be in good standing with the City of Jacksonville Beach.**

Please read the following questions and statements below. Please sign the application form in order for it to be processed. If there are any questions, please call 904-580-2841. If you answer "yes" to a question, furnish details in the space below. Include dates, location, sentences, whether misdemeanor or felony, dates of parole/probation, unpaid fines or penalties, name(s) under which charged, and any other pertinent information. An arrest or convict ion record will not necessarily disqualify you; however, an untruthful answer will cause your application to be denied.

1) Are you presently subject to an indictment, criminal information, arraignment, or other means by whichformal criminal charges are brought in any jurisdiction? _ Yes__No

Comment:_____

_____

2) Have you been arrested in the past six months for any criminal offense?Yes_____No

Comment:_____

_____

3) For any criminal offense – other than a minor vehicle violation – have you ever: a) been convicted; b) pleadguilty; c) plead nolo contendere; d) been placed on pretrial diversion; or e) been placed on any form of parole or probation (including probation before judgment)?___Yes__No

Comment:_____

_____

The undersigned warrants that the information contained in this application (and any supplemental information) is, to the best of my knowledge, true and correct. The undersigned further understands that the use of this information is only for consideration of the Community Redevelopment Agency Façade Renovation Matching Grant Program I acknowledge that I have received, read and will comply with the guidelines of this program. The undersigned grants authorization to verify any answers contained herein.

If the Grant is approved, the undersigned warrants that they have the matching funds available to complete the project as envisioned in the application. The undersigned understands and agrees that all information furnished in connection with this application for the Community Redevelopment Agency Façade Renovation Matching Grant Program involves the use of public funds as such may be made public pursuant to the statues of the United States of America, the State of Florida and the City of Jacksonville Beach, Florida.

Applicant/Business Owner Signature_____ Date _____

Print Name _____

Applicant/Business Owner Signature_____ Date _____

Print Name _____

Property Owner Signature_____ Date _____

Print Name _____

OWNER'S AFFIDAVIT OF CONSENT
State of Florida

Before me, the undersigned authority, this day personally appeared

Who, duly sworn, upon oath, deposes and says:

1. That he is the duly authorized representative of owner requesting approval of façade renovation grant for theproperty described below.
2. That all owners that he represents have given their full and complete permission for him to act in their behalf for the above stated request.
3. That the following description set forth in this document is made a part of this affidavit and contains the current names, mailing addresses and legal descriptions for the real property, of which he is the owner or representative.
4. That I acknowledge the applicant's request for funding to make alterations to the property and understand that recommendations may be made by the City's departments when appropriate, in connection with this funding request. I, therefore, give my consent to the project described in this application.

Further Affiant sayeth not.

Signature_____

_____

PROPERTY DESCRIPTION

_____

_____

_____

PROPERTY ADDRESS

_____

_____

Sworn to and Subscribed before me

This_____day of

_____20_____

Notary Public, State of Florida at Large

My Commission Expires:

The following criteria will guide the agency’s review and scoring of submitted applications:

Return on Investment (ROI) Evaluation Criteria
• Visibility and impact on surrounding businesses
• Contribution to overall aesthetic improvement of the district
• Potential for increased property value and tax revenue
• Long-term maintenance and durability of improvements