



Downtown West Orange Alliance Sign Grant Form

Date of Application: _____

Applicant's Business Name: _____

Applicant's Full Name: _____

Business Owner's Email Address: _____

Business Address: _____

West Orange, NJ 07052

Business Phone: _____ Cell Phone: _____

Landlord's Full Name *(if other than the applicant)*: _____

Landlord's Mailing Address: _____

Landlord's Phone: _____ Landlord's Email: _____

Briefly describe the proposed improvement and how it will benefit the appearance of the business and building:

Total Cost of Improvement: _____ Total Grant Amount: \$ _____

Please include the following items:

- A photograph of current conditions
- A drawing, or mockup, of the proposed sign and/or façade.
- Color and/or material samples *(if applicable)*