

Bexley Commercial Rehabilitation Grant Program Application

Applicant Name:	Kelly Muir, Excel	karate
Property Address:	246B E Main St	<u> </u>
Owned/Rented?:	Owned / Rented (If rented, written approval by Landlord to this application)	of proposed improvements must be attached
Project Description:		of 24u5 EMain replacing rolls signs)
Estimated Project Cost:	\$ 2400.00	
Amount Requested:	\$ 840.00 (Maximum of 359	6 of project cost, up to \$10,000)
Applicant Signature:	(see ariginal scan,	enclosed)
For Completion by Gra	ant Administrator:	
Does the project comply with	Section 6 and 7 of Ordinance 08-03?	Yes Development
List Available Funds for Grant Recommendation to Planning		Accent: 01. 170.51321 Approve
Recommended Funding Amou	unt:	s 840.00



Bexley Commercial Rehabilitation Grant Program Acceptance of Reimbursement Agreement

1.	I/We,, hereby enter into this AGREEMENT to enable us to receive a City of		
	Bexley, Main Street Redevelopment District Commercial Rehabilitation Program Grant reimbursement amount o		
	\$ toward the costs of completing the rehabilitation work listed in the Contracto		
	Selection Summary attached to this document and incorporated herein by reference. All work shall be done at		
	The total contracted project amount is \$		
	Reimbursement shall be made only after proof of payment has been made for all rehabilitation work completed.		
2.	I/We understand that all rehabilitation work must comply with all applicable State of Ohio, Franklin County, and loca		
	codes and regulations.		
3.	I/We agree to carry out and complete all rehabilitation work as approved by the Bexley Planning Commission.		
4.	I/We agree to maintain a membership in the Bexley Area Chamber of Commerce.		
5.	A City of Bexley warrant payable to will be issued within 30 days of fina		
	inspection approval and after I/We submit a Request for Reimbursement.		
6.	In the event that it is found by the City of Bexley that the terms of this AGREEMENT were not complied with, the		
	Rebate will not be issued, or it will be held until the terms are met.		
7.	No current tenants will be displaced by this rehabilitation project.		
Thi	is AGREEMENT is not transferable or assignable without prior, written approval of the City.		
IN	WITNESS WHEREOF; the parties have caused this AGREEMENT to be executed effective this day		
of	, 2024.		
Gra	antee's Name (Type or Print) Ben Kessler, Mayor City of Bexley, Ohio		
 Gra	antee's Signature		

APPROVED AS TO FORM: Marc Fishel, City Attorney



Bexley Commercial Rehabilitation Grant Program Application

Applicant Name:	Kelly afra Ex	at Knowle
Properly Address	3468 = 6/46	Speet
Ownest/Remass?	Dwines Sun(e) If emissi wellies approval by Lamile to the application)	ad of proposed improvements must be attached
Project Description		con Wall or Inter E Mais Crementy Bus 2403)
Estimated Project Cast	1 340 (Manipum of	* \$4.00** Pink of project cost, up to \$10,000
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For Completion by G	rant Administrator:	
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3.	VWIs agree to carry out and complete all rehabilitation work as approved by the Bedey Planning Commission.
4	i™e agme to maintain a memberohip to the Besley Area Chamber of Commerce.
T.	A City of Bookey warrant payable to will be issued within 3D days of final
	inspection approval and after i/We submit a Request for felimbursement.
6.	In the event that it is found by the City of Seeley that the terms of this AGREEMENT were not complied with, the
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Get	untee's Name (Type or Print) Sen Kasoler, Mayor City of Besley, Chio

Grantee's Signature

APPROVED AS TO FORM: More Fishel, City Attorney