



INVEST HAGERSTOWN SIGN & FACADE GRANT APPLICATION

For Office Use Only:

Case # HDC-_____ Date Accepted_____ 45-Day Time Limit Expires_____

Please refer to the map at the end of this document to determine in which district your business is located and check the appropriate box(es):

- Downtown City-Center Mixed Used (CC-MU) Zoning Area** (Required for eligibility.)
- If Also,
- Historic District** (DPED will forward this application to Planning staff for HDC Review.)

Property Information:

Property Address: _____

Applicant Information:

Name: _____

Company Name: _____

Applicant's Mailing Address: _____

Phone: _____ Email: _____

Website: _____

Property Owner Information (if Different from Applicant):

Name: _____

Property Owner's Mailing Address: _____

Phone: _____ Email: _____

DESCRIPTION OF PROPOSED WORK (Please include a detailed description including dimensions, materials, location on building, etc.) If necessary, please attach additional sheets.

EXPECTED START DATE: _____

EXPECTED COMPLETION DATE: _____

REQUESTED SIGN GRANT AMOUNT (MAX \$1,500): \$_____

AND/OR

REQUESTED FAÇADE GRANT AMOUNT (MAX \$7,500): \$_____

TOTAL PROJECT COST: \$_____

Required Attachments:

ALL APPLICANTS

- Description of proposed scope of work.
- Sign dimensions, proposed design and layout, materials, and method of attachment.
- Project budget and construction cost estimates itemizing the scope of work for the project.
- Project timeline.
- Financing plan showing proposed funding sources and any other incentives or grants being used (bank statement, confirmed loan letter, award letters, etc.)

APPLICANTS LOCATED IN DOWNTOWN HISTORIC DISTRICT

- 1 copy of drawing, sized 11x17 inches or smaller (if larger, provide 12 copies).
- Manufacturer's literature for all materials being proposed and/or sample materials proposed.

Applicants must comply with all conditions indicated on their application form and in the published Program Guidelines and subsequent information provided in support of this application and eligibility criteria of the program, particularly including receipt of buildings permits for proposed work and implementation of approved development plan and schedule. Any changes to the approved development plan and schedule must be resubmitted for review and approval of the Invest Hagerstown Review Committee to determine continued eligibility of the project. If a project is disqualified, any financial incentives received to date will be required to be repaid to the City. There may be additional project information requested from the applicant at any time during the process.

Applicant Signature:

By signing below, I certify that the information above is true and correct, I agree to comply with the program requirements and eligibility as described in the Invest Hagerstown Grant Guidelines, and I understand that if my application is approved, failure to comply will result in termination of the Letter of Commitment.

Applicant's Signature: _____ Date: _____

Property Owner Signature

If Applicant is not the property owner, the property owner's signature here provides written authorization for the project.

Property Owner's Signature: _____ Date: _____

Return to:

City of Hagerstown
Department of Planning & Economic Development
32 N. Potomac, Second Floor, Hagerstown, MD 21740
Phone: 301-739-8577 ext 111 Email: dcjed@hagerstownmd.org

Hagerstown Historic District Commission Action:

	Approval – Certificate of Appropriateness
	Approval – Certificate of Hardship
	Denial – Certificate of Appropriateness
	Denial – Certificate of Hardship

Historic District Commission Chair Signature _____
Date

Revisions:

Revision Approved / Denied:

Historic District Commission Chair Signature _____
Date

[vs. 11.25.2025]