

# Town of Vinton

## Change of Use Grant Program

### Application

DATE OF SUBMISSION: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

PLEASE INDICATE IF YOU ARE THE PROPERTY OWNER (CIRCLE ONE):      YES      NO

**IF YOU ARE NOT THE PROPERTY OWNER, PLEASE ATTACH A CONSENT LETTER FROM THE PROPERTY OWNER STATING YOU HAVE APPROVAL ON THE PROPOSED PROJECT.**

Address of Property: \_\_\_\_\_

Tax Map # \_\_\_\_\_

Current/ Most Recent Use \_\_\_\_\_

Proposed New Use \_\_\_\_\_

Please describe any already known building improvements to be made for new use in reference to the Virginia State Building Code:

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Estimated Project Start Date: \_\_\_\_\_

Expected Completion Date: \_\_\_\_\_

Estimated Total Cost of Improvements:      \$\_\_\_\_\_ + 10% contingency

Total Grant Amount Requested      \$\_\_\_\_\_ Not to exceed \$5,000

Signature: \_\_\_\_\_ Date \_\_\_\_\_

Business Name/DBA:

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# OWNER'S CONSENT FORM

I, \_\_\_\_\_, certify that I own the property located at \_\_\_\_\_ in Vinton, Virginia, and that I have reviewed the application for the **Change of Use Grant Program** submitted by \_\_\_\_\_ and that I fully support this application.

I further certify that this person or business holds a valid lease of \_\_\_\_\_year(s) with an expiration date of \_\_\_\_\_.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Telephone #