BEAUMONT ECONOMIC DEVELOPMENT DEPT.

550 E 6TH STREET, BEAUMONT, CA PHONE (951) 769-8527 **BEAUMONTCA.GOV**

Downtown Façade Improvement Program

Application Form

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APPLICAN	IT INFORMATION			
Full Name :	DAVE COREY			
Applicant Address :	960/966/968 BEAUMONT AVE			
City, State, Zip :	BEAUMONT, CA 92223			
Email :	DAVECOREY1@GMAIL.COM	Phone	213-505-2098	

Number:

Other:

Name of Business: BERKSHIRE HATHAWAY HOMESERVICES CALIFORNIA REALTY

Own

Rent

PROPERTY OWNER INFORMATION

Applicant's Interest in Property:

DAVE COREY Full Name: **Property Owner** 15 SIERRA VISTA Address: LAGUNA NIGUEL, CA 92677 City, State, Zip: **Phone** Email: DAVECOREY1@GMAIL.COM 213-505-2098 Number:

PROPERTY INFORMATION

Property Address or location :	960/966/968 BEAUMONT AVE., BEAUMONT CA 92223
Assessor's Parcel Number :	415-271-003
Total Site Acreage :	9583 SF
Building Square Footage :	2,200 + 700
Proposed or Current Use :	COMMERCIAL OFFICE



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PROJECT DESCRIPTION

General Description of Business and Proposed improvements :				
PHASE 1: UPDATE AND MODERNIZE	COMMERCIAL BUILDING (FRONT)			
REPAINT EXTERIOR, ADD LEDGESTO	ONE AND SYNTHETIC WOOD TO FRONT FACADE,			
ADD NEW CHANNEL LETTER SIGN. R	EPLACE FENCE AND ADD NEW LANDSCAPING.			
PHASE 2: REMOVE ASBESTOS, DEMO	OLISH REAR BUILDING, CAP UTILITIES, REPAIR			
ASPHALT, RESLURRY PARKING LOT	AND ADD 4 PARKING SPACES.			
Estimated Cost of Improvements :	\$80,484.69			
Requested Funding/Reimbursement amount :	\$40,242.34			

NOTIFICATIONS

- Electronic submittal of applications is allowed.
- Appointments are required for in-person submittal. Contact the Economic Development Department at (951) 769-8527 for scheduling.
- Acceptance of the application at the counter does not represent a complete application or guarantee funding.



Property Owner Signature:

Date:

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Application			
ACKNOWLEDGEM	ENTS		
the improvements under this \mathcal{DC} I hereby acknowle	edge that I must comply with California Labor Code Prevailing Wage Requirements for s program as outlined by the Program Guidelines. edge that I will obtain plan approval and any applicable Planning and Building Permits and will comply with all city policies and ordinances including business permit		
	edge that I will obtain Commercial General Liability Insurance and a policy of Worker's butlined by the Program Guidelines.		
-	edge that I am responsible for ongoing maintenance of the improvements for five (5) on of leverage-funded improvements for projects under this program.		
ATTACHMENTS			
I hereby acknowle	edge that a detailed scope of work is required and will be provided with this nsidered for the program.		
AUTHORIZATIONS			
Print Applicant Name :	DAVE E COREY		
Applicant Signature :	Dave Coney		
Date:	11-4-24		
Print Property Owner Name :	DAVE E. COREY		

Dave Coney

11-4-24