

Application for ARGP

APN _____	Amount Requested _____
------------------	-------------------------------

Name	
Address	
Zip Code	E-mail Address
Telephone Number	Fax Number
PBID Tax Assessment	

Work Requested

- Repair/Replace Sidewalks, Walkways, Steps and/or Fences
- Repair/Replacement of Windows and Doors (Exterior)
- Repair/Replace Exterior Trim
- Repairs Walls and Wall Coverings (Exterior)
- Painting Exterior
- Site Work (i.e., Parking Lots and Landscape Improvements)

- Permit Required
- Permit not Required

Please Attached the Following with Application:

- Copy of 3 Estimates
- Work Description with Before Pictures
- Estimated Start and Completion Date
- Copy of Current Tax Bill

Applicant Signature

Date

Board Approved

Board Denied

Comments

Signature Authorized Official

Date