

Exhibit C

**GRAPEVINE TOWNSHIP REVITALIZATION PROJECT  
APPLICATION  
FY2023-2024 GRANT PROGRAM  
\*\*\*PLEASE NOTE:  
ALL GRANT APPLICATIONS MUST BE SUBMITTED VIA US MAIL ONLY  
CERTIFIED WITH RETURN RECEIPT**

Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

Owner of Property (if different from above): \_\_\_\_\_

Owner Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Owner Telephone(s): \_\_\_\_\_

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Historic House Name (if known): \_\_\_\_\_

Address: \_\_\_\_\_ Zip: \_\_\_\_\_

Date building was built (if known): \_\_\_\_\_

Please check, if located in one of the below:

National Register Historic District       Other \_\_\_\_\_  
 College Street Historic District

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Brief Description of the Project: Applicant must summarize the proposed project in this space. (If desired, applicant may also attach an additional sheet more fully explaining the reason for the grant request or if available, drawings indicating the scope of work).

\_\_\_\_\_

\_\_\_\_\_

Description of Project Expenses	Your Share (1/3) (1/2 for rental)	Township Share (2/3) (1/2 for rental)
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\_\_\_\_\_

\_\_\_\_\_

**TOTAL**

\$ \_\_\_\_\_

\$ \_\_\_\_\_

Anticipated Project Start Date: \_\_\_\_\_

Anticipated Project Completion Date: \_\_\_\_\_

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Is this a phase of a larger project(s)? Please explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Have you entered into any contracts relative to this project? Please list: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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Is your property mortgaged? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, provide information on mortgage holder.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do liens exist on the property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, describe the liens and amounts.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Do you currently reside at the property? \_\_\_\_\_ Yes \_\_\_\_\_ No

If yes, do you intend to continue to reside at the property for a period of one (1) year?

\_\_\_\_\_ Yes \_\_\_\_\_ No

If no, please provide information regarding your current tenant at the property.

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

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Return this application to: Grapevine Township Revitalization Project, Inc.  
636 South Main Street  
Grapevine, Texas 76051

I certify that all information contained in this application and all information furnished in support of this application is given for the purpose of obtaining financial assistance in the form of a grant and is true and complete to the best of my knowledge and belief.

\_\_\_\_\_  
Owner Signature

\_\_\_\_\_  
Date