

City of Scottsbluff, Nebraska

Monday, October 18, 2021

Regular Meeting

Item Reports2

**Council to discuss and consider action on City of Scottsbluff
Façade Improvement Grant.**

Staff Contact: Zachary Glaubius, Planning Administrator

Agenda Statement

Item No.

For Meeting of: October 18, 2021

AGENDA TITLE: Community Façade Grant

SUBMITTED BY DEPARTMENT/ORGANIZATION: City of Scottsbluff Community
Redevelopment Authority

PRESENTATION BY: Zachary Glaubius, Planning Administrator/ CRA Secretary

SUMMARY EXPLANATION: The City of Scottsbluff Community Redevelopment Authority approved the following Community Façade Grant at the 10-13-2021 meeting.

615 East Overland Dr. – Amila’s Decorations -\$5,700 grant
-Applicant intends to install new windows and doors on building, and paint the building.

BOARD/COMMISSION RECOMMENDATION: On October 13, 2021, the CRA approved the three above façade grants and made a positive recommendation to the City Council for approval.

STAFF RECOMMENDATION: Staff recommends approval of the grant.

EXHIBITS

Resolution ☐

Ordinance ☐

Contract ☐

Minutes ☐

Plan/Map ☐

Other (specify) Grant Applications and Site Photos

NOTIFICATION LIST: Yes ☐ No ☒ Further Instructions ☐

Please list names and addresses required for notification.

APPROVAL FOR SUBMITTAL: _____

City Manager



CITY OF SCOTTSBLUFF

FAÇADE IMPROVEMENT GRANT PROGRAM

The City of Scottsbluff has allocated \$250,000 to be used for grants for façade improvements within areas of the City designated as blighted and substandard (also known as TIF Districts or Community Redevelopment Areas). Grant funds must be used to improve the appearance of a clearly visible portion of the exterior of an eligible property. (Roof replacement/repair, for example would not be an eligible expense.) Program guidelines are below:

1. Grant amounts: Minimum grant amount is \$500 per property. Maximum grant amount is \$10,000 per property.
2. Required Cash Match: A property owner must match every dollar of grant money with one dollar of the property owner's own funds. All funds (grant funds and the match) must be used for improvements to the exterior of the property which are clearly visible.

Eligible improvements include, but are not limited to:

- | | | |
|------------------------|-----------------------|------------------|
| -Paint (exterior only) | - Siding | - Awnings |
| -Masonry | -Sidewalk repair | - Exterior Doors |
| -Signage | -Windows | - Demolition |
| -Landscaping | - Parking Lot Repairs | |

3. Applications must include actual bids or estimates which equal or exceed the grant funds requested and matching funds. Bids or estimates must be from, and work must be completed by, a contractor registered with the City of Scottsbluff. Costs of materials are also eligible for reimbursement if the property owner provides the labor.

4. Costs incurred prior to approval of the grant application will not be reimbursed with grant funds or qualify as matching funds.

5. Applicants must pay for the work and/or materials and submit to the City all receipts for work completed and for materials purchased in order to be reimbursed. All work must be completed and receipts must be submitted to the City for reimbursement by **September 10, 2021**.

6. Applications will be reviewed by City Staff and presented to the City's Community Redevelopment Authority ("CRA"). The CRA plans to hold meetings on the following dates to review applications:

January 13, 2021

February 10, 2021 (subject to continued availability of grant funds)

March 10, 2021 (subject to continued availability of grant funds)

(These meeting dates are subject to change.)

At each meeting, the CRA will review all applications submitted at least one week prior to such meeting. Applicants are expected to attend the CRA meeting to present their application to the Community Redevelopment Authority and answer questions.

The CRA will make recommendations to the City Council, who will make a final funding determination at a meeting following the CRA meeting.

7. Approved applicants must give monthly written reports to the City regarding the progress of the project until completed.

8. Application Period will begin on **November 17, 2020 and will continue until all grant funds have been awarded.**

9. All proposed improvements must meet the requirements of the City's building, fire, and zoning codes.

Facade Improvement Program Application

Project Information

1. Applicant Name: Armando & Maria Aguilera
Applicant Address: 615 East Overland
Telephone No.: 308-641-3331 E-Mail Address: _____
Property Owner (if different than applicant): _____

2. Project Site Address: 615 East Overland

3. Is the Project Site Currently Occupied? Yes ☒ No ☐

4. Land Use of Project Site (Select one):

Restaurant ☐

Retail ☒

Service ☐

☐ Other (Please specify): _____

5. Nature and Name of Business (if applicable): Amila's Decorations

6. Proposed Project: Describe in detail; attach plans and specifications:

total inside remodel \$10,200
total outside remodel \$11,400

7. List all other funds or assistance the applicant has received from the City in the last 10 years (e.g. other grants, Economic Development Assistance (LB840) loans or grants, Tax Increment Financing)

Type of Assistance: E. Overland Facade Grant

Amount: ~~\$21,000~~ total for inside & out 6,000

Date: 10-14-21

\$10,000 Facade Improvement Grant for 210 E. Overland Dr - 2-10-21

\$984 E. Overland Facade Improvement Grant for 611 E. Overland Dr. - 1-13-21

\$6,000 E. Overland Facade Improvement Grant for 615 E. Overland Dr. - 10-14-20

8. Estimated Project Costs:

Exterior Improvements (describe)

\$ 11,400

Other (describe)

Total

\$ 11,400

Grant Funds Requested*

\$ 5,700

*Grant funds requested must not exceed the \$10,000 maximum

*Grant funds requested must not exceed ½ of the cost of exterior improvements

*Bids or estimates from contractors and material estimates must be included at the time of application

9. Person doing work (if different than applicant): LA Construction

Address: 2414 W. 17th Street Scottsbluff, NE

Phone No.: 308-225-1772

10. Project Construction Schedule (estimated):

Start Date

ASAP

Completion Date

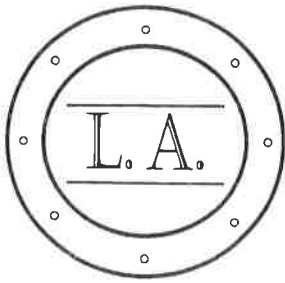
ASAP

***ALL WORK MUST BE COMPLETED AND RECEIPTS SUBMITTED TO THE CITY NO LATER THAN SEPTEMBER 10, 2021. IF THE APPLICANT FAILS TO GIVE TIMELY REPORTS TO THE CITY OR, IF BASED ON THE APPLICANT'S MONTHLY REPORTS IT APPEARS TO THE CITY THAT THE WORK WILL NOT BE COMPLETED ON TIME, THE CITY MAY, IN ITS SOLE DISCRETION, RESCIND OR REDUCE THE GRANT AWARD.**

To be completed by Staff:

Zoning of Property 1,056

Square footage of building C-3



PROPOSAL

L. A. CONSTRUCTION

2414 West 17th Street
Scottsbluff, NE 69361
308-225-1772
amggluis1986@gmail.com

PROPOSAL SUBMITTED TO Armando and Mario Aguilera		PHONE (308) 641 3337	DATE 7-5-21
STREET 615 E. Overland		JOB NAME	
CITY, STATE, AND ZIP CODE Scottsbluff, NE		JOB LOCATION	
ARCHITECT	DATE OF PLANS		JOB PHONE

We hereby submit specifications and estimates for:

LABOR:

- | | |
|---|-------|
| - Remove the south wall and frame, cleaning up (window) | 1,500 |
| - Install the window and trims (112 x 54.5) | 4,500 |
| - Remove old door and install new | 2,500 |
| - Prepare for painting | 1,000 |
| - Paint | 1,500 |
| - Replace west window 34 x 19 | 400 |

We Propose hereby to furnish material and labor - complete in accordance with the above specifications, for the sum of:

dollars \$ **11,400**

Payment to be made as follows:

This estimate includes material and labor

All material is guaranteed to be required. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado and other necessary insurance. Our workers are full covered by Workman/d Compensation Insurance.

Acceptance of Proposal -- The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.

Date of Acceptance: _____

Authorized
Signature

Note: This proposal may be withdrawn by us if not accepted within _____ days

Signature **X** _____

Signature **X** _____

LAC001-6/20

