

Last rev: 5/2023

Owner Authorization Form

This form is required when the Applicant is not the Property Owner

Core Area Business Assistance Program

PROPERTY INFORMATION:		
Property Owner Name:		
Phone: Emai	l:	
Building Address:		
Tenant Space Address (If Different):		
When was the building originally built?:	<u></u>	
Has this property received funds from the Buildi Improvement Program, or Tenant Improvement		
GRANT APPLICATION DETAILS:		
My tenant intends to apply for the following gran Business Assistance Program:	t through the City of Bend's Co	re Area
Design Assistance: In-kind architectural ser	vices to create a new design cond	cept.
Construction Assistance: A cash matching	grant to support improvements.	
AUTHORIZATION, CERTIFICATION, AND CONSI	roperty owner (Owner) of the build in Bend Oreg	on (Building).
I authorize (Business), to apply for and accept grant funds from above.	, the business that is housed in m the City of Bend's grant program	y building identified
I understand that if the Business is awarded a grant, Agreement in order for the grant to be finalized.	I may be required to additionally s	sign a Grant
By signing below, Owner certifies that all information Owner's knowledge.	provided in this section is true to	the best of
Printed Name of Owner	Signature of Owner	Date

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