

BUSINESS. BY THE BAY.

La Porte Enhancement Grant Application

Please print clearly. Please submit a completed application to:

Office of Economic Development
City of La Porte
604 W. Fairmont Parkway
La Porte, TX 77571

APPLICANT INFORMATION:

APPLICATION DATE: 3/8/2024

ANDREW MULVEY

Applicant Name

GIRARD EQUIPMENT INC

Business Name

531 N 10th St, LA PORTE, TX 77571

Physical Business Address

Business Owner (if different from applicant)

531 N 10th St, LA PORTE, TX 77571

Mailing Address

330-418-4770

amulvey@girardequip.com

Contact Phone

Email Address

TYPE OF WORK (check all that apply):

Façade

Awnings/Signage

Beautification

Parking Lot Improvements

DETAILS OF PLANNED IMPROVEMENTS (attach additional pages if necessary):

We have a sign that has been damaged
due to weather. The improvements would
be to replace the to its original appearance
and paint the pole. I have already
recieve 3 Quotes to do so.

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Please list the name of each Contractor and/or Project Architect and the Total Amount of each bid. Please, also, attach the original proposals and work estimates:

CONTRACTOR/PROJECT ARCHITECT	TOTAL
1. HUMBLE SIGN CO.	\$ 9,772.59
2. SIGNWORX	\$ 20,215.69
3. ROYAL SIGNS & AWNINGS	\$ 6,405.15
4. LA PORTE SIGN COMPANY HB	\$ 4,113.50 HB
5.	\$

BUDGET DETAIL

PROJECT EXPENDITURES	FUNDS	FUNDS APPLIED	TOTAL
Façade Rehab	\$	\$	\$
Awnings/Signage	\$ 2,050.75 HB	\$ 2,050.75 HB	\$ 4,113.50 HB
Beautification	\$	\$	\$
Parking Lot Improvements	\$	\$	\$
Other (list):	\$	\$	\$
TOTAL	\$	\$	\$

Total estimated cost of proposed project: \$ 4,113.50 HB

Amount requested (up to 50% of total cost, \$2,500 to \$50,000): \$ 2,050.75 HB

Please attach color samples, model numbers (for windows, doors, etc.), photos, scaled drawings, and other illustrations of work to be completed. Please include as much detail as possible.

Your signature on this application certifies that you understand and agree with the following statements: I have met with the LPDC and I fully understand the Enhancement Grant procedures and details established. I intend to use these grant funds for the eligible renovation projects, as spelled out in the application. I have not received, nor will I receive insurance monies for this revitalization project, OR I have disclosed all pertinent insurance information. I understand that if I am awarded an Enhancement Grant, any deviation from the approved project may result in the partial or total withdrawal of the grant funds.



 APPLICANT SIGNATURE

03/08/24

 DATE