Goodhue, Minnesota 55027

Business Façade Improvement Program - Payment Request Form

Applicant Name:_____ **Date:**_____

Business Name:_____

Business Address:_____

Project Cost and Assistance

Estimated Project Cost: $_____

Total Final Project Cost: $_____

Payment Amount Requested: $_____

Contractor and Supplier Information (if additional contractors/suppliers were used, please attach an additional page with remaining information**):**

1. Contractor Name:_____

    Contact Email:_____

    Contact Phone Number:_____

    Business Address:_____

2. Contractor Name:_____

    Contact Email:_____

    Contact Phone Number:_____

    Business Address:_____

3. Supplier Name:_____

Contact Email:_____

Contact Phone Number:_____

Business Address:_____

4. Supplier Name:_____

   Contact Email:_____

   Contact Phone Number:_____

   Business Address:_____

Payment Request Form Certification

I hereby agree that the work, as stated in the Business Facade Improvement Program Application form, has been completed and paid in full. It is understood that the actual amount disbursed from the City of Goodhue will be based on the results of inspection by the EDA/City Staff. I further understand that the City of Goodhue or the Goodhue EDA assumes no responsibilities for the work performed and does not warrant any work performed.

_____   _____
 Name/Title (Printed)   Signature

Required Attachments

Please submit the following forms along with your payment request form; a payment will not be presented to City Council for approval or processed until all requested documents are provided by the applicant:

1. Documentation of work completed (ex: invoice by contractor)
2. Proof of payment (receipt from contractors completing work)
3. Photos of property exterior after work is completed
4. Copies of approved building permits (when applicable)
5. Any additional documentation as requested