

# City of Aurora-Ward 1 Business Grant-Application Approval Form

## COMPANY INFORMATION

Company Name:	
Owner Name:	
Business Address:	
Email:	
Phone Number:	
Prepared By:	

## OFFICE ADMINSTERS

Application Received/Date Stamped:	<input type="checkbox"/> Y <input type="checkbox"/> N
Application Signed:	<input type="checkbox"/> Y <input type="checkbox"/> N
B2 Licensed Business:	<input type="checkbox"/> Y <input type="checkbox"/> N
Three Bids from Licensed Contractor:	<input type="checkbox"/> Y <input type="checkbox"/> N
Informed Building Owner May Need Permit:	<input type="checkbox"/> Y <input type="checkbox"/> N
Lien Waiver (If Applicable): At end give to purchasing	<input type="checkbox"/> Y <input type="checkbox"/> N
Received Tax ID:	<input type="checkbox"/> Y <input type="checkbox"/> N
Before Pictures Attached:	<input type="checkbox"/> Y <input type="checkbox"/> N

## DEPARTMENT APPROVALS

Property Standards ___Y ___N	Type of Violation:
Building and Permits ___Y ___N	Type of Violation:
Planning and Zoning ___Y ___N	Type of Violation:
Revenue and Collections ___Y ___N	Open Accounts:
Police Department ___Y ___N	Type of Violation:
Fire Marshal ___Y ___N	Type of Violation:
Clerk's Office ___Y ___N	Type of Violation (liquor license)
JULIE Contacted-If Necessary	<input type="checkbox"/> Y <input type="checkbox"/> N

**WARD COMMITTEE**

Reviewed Completed Work	<input type="checkbox"/> Y <input type="checkbox"/> N
Paid Receipt Attached	<input type="checkbox"/> Y <input type="checkbox"/> N
After Pictures Attached	<input type="checkbox"/> Y <input type="checkbox"/> N
Committee Reviewed	<input type="checkbox"/> Y <input type="checkbox"/> N
Project Amount \$_____	Amount Approved \$_____
Check Request Approved and Date	

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Alderman Signature

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Date

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Printed Name

\*Upon receipt of application, send top to purchasing

\*Send completed form to purchasing with email approval