



## CITY OF SPRINGFIELD, MASSACHUSETTS

*Mayor Domenic J. Sarno*

# Storefront Improvement Program



## Application

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## **Application Checklist**

**Please include the following with your application:**

- Completed Application
- Required Documents
  - W-9: Request for Taxpayer Identification Number and Certification (included).
  - Vendor Maintenance Form (included).
  - Duns Number Form (included).  
Please visit refer to page 14 or <http://www.sba.gov/content/getting-d-u-n-s-number> for assistance on how to get a DUNS number.
  - Copies of artist's drawings, sketches, or architectural plans.
  - Copy of construction bids from at least two (2) licensed and insured contractors who comply with Davis-Bacon wage rates.
  - Copy of your lease if you are a tenant.

*Please return signed and complete application to (email preferable):*

**Marcos Gonzalez**  
Program Administrator

City of Springfield  
Office of Planning & Economic Development  
70 Tapley Street  
Springfield, MA 01104

Phone: (413) 750-2810  
E-mail: [mgonzalez@springfieldcityhall.com](mailto:mgonzalez@springfieldcityhall.com)

*Please refer to the Storefront Improvement Program Guide for more details.*

## Storefront Improvement Grant Application

DATE RECEIVED BY CITY (CITY TO FILL OUT): \_\_\_\_\_

### Applicant Contract Information

Applicant Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Applicant Phone Number: \_\_\_\_\_ home/ cell

Applicant Email: \_\_\_\_\_

Website: \_\_\_\_\_

Applicant Type:  Business owner/ Tenant

Property owner

**Proposed Project Information**

1) Business Name: \_\_\_\_\_

2) Business Address: \_\_\_\_\_ SPRINGFIELD, MA \_\_\_\_\_

3) Is the project located in a CDBG Eligible area? (city to fill out): YES \_\_\_\_\_ NO \_\_\_\_\_.

4) Describe type of business (Brief paragraph describing business):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5) Have you attached rendering/ artist sketches of the proposed project?

YES \_\_\_\_\_ NO \_\_\_\_\_

6) Business Hours of Operation

MONDAY \_\_\_\_\_

FRIDAY \_\_\_\_\_

TUESDAY \_\_\_\_\_

SATURDAY \_\_\_\_\_

WEDNESDAY \_\_\_\_\_

SUNDAY \_\_\_\_\_

THURSDAY \_\_\_\_\_

7) Current number of permanent jobs: FULL-TIME \_\_\_\_\_ PART-TIME \_\_\_\_\_

8) Are you currently working with an architect? If yes, please provide their contact information:

\_\_\_\_\_  
\_\_\_\_\_

9) Do you own or lease the proposed property location?

Lease property

Property owner

10) What are your lease terms? (Monthly cost, term dates, renewal options, etc.):

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11) Please provide the property owner's name and contact information:

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12) If you lease the property, do you understand that this program requires written approval by the property owner, prior to submitting the application?

Yes, I understand and agree \_\_\_\_\_ No \_\_\_\_\_.

13) Do you understand that this program requires compliance with Davis-Bacon wages for all construction projects, and will require city monitoring of all construction activity?

Yes, I understand and agree \_\_\_\_\_ No \_\_\_\_\_.

14) Do you understand that this program requires compliance with HUD Section 3. More information can be found at: <https://www.hud.gov/section3>

Yes, I understand and agree \_\_\_\_\_ No \_\_\_\_\_.

15) Do you understand that if you are a business owner applying for this grant, you are required to match a minimum of 10% of the grant amount, and if you are a property owner applying for this grant, you are required to match 100% of the grant amount?

Yes, I understand and agree \_\_\_\_\_ No \_\_\_\_\_.

**Funding Request**

**Please attach copies of construction bids from at least two (2) licensed and insured contractors who comply with Davis-Bacon wage rates.**

**Funding Limit:** Business owners may apply for up to \$25,000 per business. Property owners may apply for up to three (3) storefronts for a total of \$75,000. No single storefront will be awarded more than \$25,000. Note that single storefronts with frontage greater than 50ft in length may be eligible for additional grant funding.

**Private Match:** For business owners applying, a minimum of **10% match** of total project costs is required. For property owners applying, a minimum of **100% match** of requested funds will be required. Private match to be expended in the form of contractor deposits before city funding is released.

16) Total estimated project cost: \$ \_\_\_\_\_

17) Total requested from grant program: \$ \_\_\_\_\_

18) Does your request meet the minimum matching requirements?

YES \_\_\_\_\_ NO \_\_\_\_\_.

19) Basic budget for Storefront Improvement Program Grant (Please, explain how do you plan to spend only the grant amount):

<u>USE</u>	<u>AMOUNT</u>
SIGNS	\$ _____
STOREFRONT FACADE	\$ _____
GLASS (WINDOWS & DOORS)	\$ _____
NEW LANDSCAPING	\$ _____
STOREFRONT LIGHTING	\$ _____
OTHER _____	\$ _____
<b>TOTAL GRANT REQUEST</b>	<b>\$</b> <span style="border: 1px solid black; display: inline-block; width: 150px; height: 20px; vertical-align: middle;"></span>

20) Please describe in detail how you would utilize the grant funding:

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21) Are you aware if you are participating in this grant program, you cannot begin any construction until you have a signed and completed contract with the City of Springfield?

YES \_\_\_\_\_ NO \_\_\_\_\_.

22) Are you aware that the City of Springfield will provide input and direction regarding project design based on application design guidelines, and the project will not move forward without city design approval?

YES \_\_\_\_\_ NO \_\_\_\_\_.

23) Have you provided at least two (2) prevailing wage competitive proposals from licensed and bonded contractors for all work being proposed?

YES \_\_\_\_\_ NO \_\_\_\_\_.

24) Have you reviewed the Storefront Improvement Program Guide and confirmed that your project meets the requirements and guidelines?

YES \_\_\_\_\_ NO \_\_\_\_\_.

25) Have you included all supporting documents from the application checklist on page 3?

YES \_\_\_\_\_ NO \_\_\_\_\_.

26) Do you understand that if your project is selected for funding, you will proceed into the contracting process with the city, which will require additional documentation?

YES \_\_\_\_\_ NO \_\_\_\_\_.



**Application Submission**

Applications will be reviewed by Program Administrator for completeness and content. It may take up to 30 days for a response to a completed application. All information must be complete prior to internal review process.

Applicants should **not** begin work prior to being given a notice to proceed from the City of Springfield program administrator. Any work done prior to approval will be done at the applicants own cost and own risk.

**Property Owner Sign Here:**

I have read and understand the program guidelines.

Property owner signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name: \_\_\_\_\_

**Business Owner Signs Here**

I have read and understand the program guidelines.

Business owner signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name: \_\_\_\_\_

Please return completed application and application checklist items in one package, electronically:

**Marcos Gonzalez**  
**Program Administrator**  
**Office of Planning & Economic Development**  
**70 Tapley Street**  
**Springfield, MA 01107**

Please direct any questions to: [mgonzalez@springfieldcityhall.com](mailto:mgonzalez@springfieldcityhall.com) or (413) 750-2810

**Required Documents**

# Request for Taxpayer Identification Number and Certification

**Give Form to the requester. Do not send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	1	Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.	
	2	Business name/disregarded entity name, if different from above	
	3	Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input type="checkbox"/> Other (see instructions) ▶ _____	
	4	Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <i>(Applies to accounts maintained outside the U.S.)</i>	
	5	Address (number, street, and apt. or suite no.) See instructions.	Requester's name and address (optional)
	6	City, state, and ZIP code	
	7	List account number(s) here (optional)	

**Part I Taxpayer Identification Number (TIN)**

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>										
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		-								
<b>or</b>										
<b>Employer identification number</b>										
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**Part II Certification**

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
- I am a U.S. citizen or other U.S. person (defined below); and
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶
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**General Instructions**

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

**Purpose of Form**

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*

**CITY OF SPRINGFIELD OFFICE OF PROCUREMENT  
36 COURT STREET - CITY HALL  
SPRINGFIELD, MA 01103  
413-787-6284 Telephone, 413-787-6295 Fax**

**VENDOR MAINTENANCE FORM**

To be Completed by Vendor (print clearly):

Business Name: \_\_\_\_\_

DBA: \_\_\_\_\_

**Send Purchase Order To:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Remit To:**

Street: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Federal ID# \_\_\_\_\_ or SS# \_\_\_\_\_

Type of Service Providing to City: Technology \_\_\_\_\_ Medical \_\_\_\_\_ Contract Labor \_\_\_\_\_ Service \_\_\_\_\_

Other: \_\_\_\_\_

**Terms:**

Discount % \_\_\_\_\_ Days to Discount \_\_\_\_\_ Minimum Order \_\_\_\_\_ Days to Net: \_\_\_\_\_

Vendor Class: Minority Owned \_\_\_\_\_ Woman Owned \_\_\_\_\_ Minority-Woman Owned \_\_\_\_\_

Purchase Order Delivery Method: E-Mail: \_\_\_\_\_ FAX: \_\_\_\_\_ Regular Mail: \_\_\_\_\_

**Contact Information:**

Contact Name: \_\_\_\_\_ Title: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Business Website: \_\_\_\_\_

**NOTE: This document must be included with your completed W-9 Form in order to be set-up as a City of Springfield Vendor. Mail or fax completed forms to the Office of Procurement. Thank you.**

**DUNS Number Form**

DUNS #: Do you have a DUNS # for your business?

YES \_\_\_\_\_ NO \_\_\_\_\_.

If YES, please provide the DUNS #:

If NO, please follow the instructions on the following page, "Obtaining a DUNS #", or follow the link:

<http://www.sba.gov/content/getting-d-u-n-s-number>

**(Note:** Application may be submitted prior to obtaining the DUNS #.

The Springfield Small Business Assistance Center or OPED staff can assist you in obtaining this number- it's easy and free of charge to you!)

## Obtaining a DUNS Number

### A Guide for Federal Grant and Cooperative Agreement Applicants

The Federal government requires that all applicants for Federal grants and cooperative agreements with the exception of individuals other than sole proprietors have a DUNS number. (See policy at: [http://www.omb.gov/grants/grants\\_docs](http://www.omb.gov/grants/grants_docs)). The Federal government will use the DUNS number to better identify related organizations that are receiving funding under grants and cooperative agreements, and to provide consistent name and address data for electronic grant application systems.

### Data Universal Number System (DUNS) Number

- The Data Universal Numbering System (DUNS) number is a unique nine-digit identification number provided by Dun & Bradstreet (D&B).
- The DUNS Number is site-specific. Therefore, each distinct physical location of an entity (such as branches, Offices, and headquarters) may be assigned a DUNS number. Organizations should try and keep DUNS numbers to a minimum. In many instances, a central DUNS number with a DUNS number for each major Office/department/agency that applies for a grant may be sufficient.
- In order to provide on-the-spot DUNS number assignment, the requestor should do this by telephone. (See telephone number below.)

### Obtaining a DUNS Number

- You should verify that you have a DUNS number or take the steps needed to obtain one as soon as possible, if there is a possibility you will be applying for future Federal grants or cooperative agreements. There is no need to wait until you are submitting a particular application.
- *If you already have a DUNS number.* If you, as the entity applying for a Federal grant or cooperative agreement, previously obtained a DUNS number in connection with the Federal acquisition process or requested or had one assigned to you for another purpose, you should use that number on all of your applications. It is not necessary to request another DUNS number from D&B. You may request D&B to supply a family-tree report of the DUNS numbers associated with your organization. Organizations should work with D&B to ensure the right information is on the report. Organizations should not establish new numbers, but use existing numbers and update/validate the information associated with the number.
- *If you are not sure if you have a DUNS number.* Call D&B using the toll-free number, **1-866-705-5711** and indicate that you are a Federal grant applicant/prospective applicant. D&B will tell you if you already have a number. If you do not have a DUNS number, D&B will ask you to provide the information listed below and will immediately assign you a number, free of charge.
- If you know you do not have a DUNS number. Call D&B using the toll-free number, **1-866-705-5711** and indicate that you are a Federal grant applicant/prospective applicant. D&B will ask you to provide the information listed below and will immediately assign you a number, free of charge.

### Managing Your DUNS Number

- D&B periodically contacts organizations with DUNS numbers to verify that their information is current. Organizations with multiple DUNS numbers may request a free family tree listing from D&B to help determine what branches/Offices have numbers and whether the information is current. Please call the dedicated toll-free DUNS Number request line at **1-866-705-5711** to request your family tree.
- D&B recommends that organizations with multiple DUNS numbers have a single point of contact for controlling DUNS number requests to ensure that the appropriate branches/Offices have DUNS numbers for Federal purposes.
- As a result of obtaining a DUNS number you have the option to be included on D&B's marketing list that is sold to other companies. If you do not want your name/organization included on this marketing list, request to be de-listed from D&B's marketing file when you are speaking with a D&B representative during your DUNS number telephone application.

Obtaining a DUNS number is absolutely **FREE** for all entities doing business with the Federal government. This includes grant and cooperative agreement applicants/prospective applicants and Federal contractors. Be certain that you identify yourself as a Federal grant applicant/prospective applicant.

### To Obtain Your DUNS Number

- Please call the dedicated toll-free DUNS Number request line for Federal grant and cooperative agreement applicants or prospective grant applicants at:

**1-866-705-5711**

The number is staffed from 8 a.m. to 6 p.m. (local time of the caller when calling from within the continental United States). Calls placed to the above number outside of those hours will receive a recorded message requesting the caller to call back between the operating hours.

The process to request number takes about 5-10 minutes. A DUNS number will be assigned at the conclusion of the call. You will need to provide the following information:

- Legal Name.
- Headquarters name and address for your organization.
- Doing business as (DBA) or other name by which your organization is commonly known or recognized
- Physical Address, City, State and Zip Code.
- Mailing Address (is separate from Headquarters and/or physical address).
- Telephone Number.
- Contact Name and Title.
- Number of Employees at your physical location.

More information can be found at: <http://www.sba.gov/content/getting-d-u-n-s-number>