Village of Amityville
DRI Business Façade Improvement Program
Application

Application Date: 02/27/2024 Submitted by: Erica Reichlin

Project Name: Windows

Applicant Name: Cornucopia's Noshery, Inc

IRS EIN #, ITIN #, or SS #: 27-0329671

Applicant Phone Number: 516-655-7625

Email Address: cornucopiachef@gmail.com

Site Address: 194 A Park Avenue

City: Amityville State: NY Zip: 11701

Applicant Address: 503 Beacon Avenue

City: Lindenhurst State: NY Zip: 11757

Mailing Address (if different): _____

City: _____ State: _____ Zip: _____

1. Provide a brief (1 – 2 sentences) description of the project:

3 new windows and vinyl sign replacement on one window

2. Does the applicant own the building? Yes ○ No ⊙

If answered "No", attach the declaration from the building owner providing approval of the project proposal as well as evidence of your lease extending through the 3-year regulatory term. See Required Attachments below.
If you answered "Yes", please provide proof of ownership. See Required Attachments below.

3. Describe the current condition of the building's facade:

outdated

4. Describe in detail the proposed improvements:

1 new window in front to replace current one that has seal damage and replacement of logo signage. 2 new windows on side to replace old oned.

5. Identify the exact components of the project that the grant funding will be used for:

3 new windows and signage

6. Describe the expected impact your proposed project will have on the building, the occupying or future business(es), and the community:

Cleaner look as windows are damaged

7. Is the proposed work visible from a public right of way? Yes ⊙ No ○

8. Will you use your own architect or grant provided assistance? Own ⊙ Grant ○

9. If own, please provide their name/address:

No architect as this is just replacement.

10. Grant Request (Small projects $5000-$25,000 Large Projects $25,000-$100,000) Request should match costs in #12): 5136.38

11. Project Match (at least 20% of the total project cost): 1027.00

12. Please provide breakdown of the work needed and estimated cost:

Work Description	Estimated Cost
3 windows	**4736.38**
new winyl logo	400.00

(If more space is needed, please provide as an attachment)

13. First available date to begin: 04/02/2024
14. Are funds currently available for the entire project? Yes ◉ No ○

15. This is a reimbursement-based grant, which means the applicant will pay for the project out of pocket and submit requests for reimbursement upon completion of the project. If the applicant does not have funds available for the entire project, explain how the project will be financed. Proof of financial resources required as an attachment. See Required Attached Requirements Below:

Business credit card

16. If the building includes residential space, please indicate the total number of units currently occupied and unoccupied for each floor of the building:
    a. First Floor
        i. Number of Units Occupied: 3
        ii. Number of Units Unoccupied: _____
    b. Second Floor
        i. Number of Units Occupied: 3
        ii. Number of Units Unoccupied: _____
    c. Third Floor
        i. Number of Units Occupied: n/a
        ii. Number of Units Unoccupied: _____

17. Please list the names of the current occupying business(es) and the number of both full and part-time jobs associated with each business:

Cornucopia's Noshery, Inc., T3 Nutrition & Ceriello Electric

18. If the building is currently vacant, please share the anticipated date of occupancy and list the names of the future business(es) and the number of both full and part-time jobs associated with each proposed business:

19. Please provide the contact information of the individual(s) managing all requirements of the grant

Name	Title	Role	Phone	Email
Erica Reichlin	President	Owner	5166557625	cornucopiachef@gmail.com

20. Are the property's municipal taxes current? Yes ◉ No ○

21. Are the property's school taxes current? Yes ◔ No ○
22. Are the property's water/sewer bills current? Yes ◔ No ○
23. Are there any liens on the property? Yes ○ No ◔
    a. If so, please explain:

24. Has applicant received or been awarded an Economic Injury Disaster Loan (EIDL) Yes ◔ No ○

25. Is the applicant a minority? Yes ○ No ◔
26. Is the applicant a woman? Yes ◔ No ○
27. Is the applicant a veteran? Yes ○ No ◔

Please initial the following statements indicating you understand and agree to each:

a. Prior to starting, NYS DRI Projects must undergo an environmental review and clearance of scope of work by the State Historic Preservation Office ER
b. NYS DRI applications must have at least two bids for each phase of work and reimbursement will be based on the lowest responsible bid ER
c. If applicant chooses a bid other than that selected by the Village, the applicant will be responsible for 100% of the difference with no reimbursement ER
d. Only work completed by a vendor that is previously approved by the Village of Amityville will be reimbursed ER
e. Awardees of NYS DRI program funds must execute a declaration agreeing to maintain improvements for three years following project completion ER
f. NYS DRI project grants will be reimbursed for eligible projects only following the satisfactory completion of an approved scope of work and submittal of required documentation ER
g. If chosen, a deposit will be required to cover the costs of the environmental review. Such deposit will be forfeited if project is not completed ER

Required Attachments	**Attached?**	
A. Photos of the building façade in its current condition	Yes ◉	No ○
B. Drawings or plans of the building which illustrate all proposed work, including any structural work or repair, paint colors, materials samples, etc. (Grant admin can provide assistance)	Yes ◔	No ○
C. Information on the methods and material to be used.	Yes ◔	No ○
D. Signed declaration from property owner	Yes ◔	No ○
E. Proof of building ownership OR proof of permission for project and lease extending through 3-year compliance period	Yes ◔	No ○
F. Proof of financial resources to complete construction,		

such as loan commitment, documentation of available line of credit, or cash in account — Yes ◉ No ○

G. Itemized budget (template attached) — Yes ◉ No ○

The undersigned affirms that:

A. The information submitted herein is true and accurate to the best of my (our) knowledge.

B. I (we) have read and understand the rules of the Village of Amityville DRI Façade Program and agree to abide by its conditions and guidelines.

C. I (we) understand that all work completed on the project must be by approved methods and with approved materials. Any variance from that which is agreed upon, without prior approval, may result in the forfeit of any funds from the Kingston DRI Façade Program.

The undersigned applicant agrees to comply with the requirements of this program as outlined in the Village of Amityville DRI Façade Improvement Program Rules.

Signature of Applicant(s):	Print Name(s)	
_____	Erica Reichlin	Date: 2/27/24
_____	_____	Date: _____

For questions about the application, eligibility, or another concern please contact:
Vision Long Island at projects@visionlongisland.org or 631-261-0242.

Ways to submit completed applications:

1. Email: projects@visionlongisland.org
2. Fax: 631-606-1502
3. Mail: Vision Long Island, 24 Woodbine Ave., Ste 2, Northport, NY 11768