



**Winters Community Redevelopment Agency
Downtown Façade Improvement Program
REBATE CLAIM FORM**

Program Participant: _____

Project Address: _____

Exterior Improvements

Type:

_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total	\$ _____

Rebate Amount (per Program Guidelines) \$ _____

I/We hereby make a formal claim for reimbursement of the above-indicated expenses incurred in improving the façade of the subject property under the Winters Community Redevelopment Agency Downtown Façade Improvement Program. I/We certify that the expenses incurred are as listed and have attached invoices marked “paid” and copies of canceled checks in support of the claim.

Date: _____

Applicant

Applicant