

Village of Solvay Commercial Façade Renovation Program (Milton Avenue)

The Village of Solvay Commercial Façade Renovation Program is the result of state and local government collaboration by Gov. Andrew Cuomo, County Executive Joanie Mahoney and Legislative Chairman Ryan McMahon. Also involved in the initial conversations were the Supervisor of the Town of Geddes and the Mayor of the Village of Solvay. As result of these conversations, funding in the amount of \$1 million was secured through New York State to restore the commercial façades along Milton Avenue.

The program will work as follows:

- 1) The financial assistance for each property will be in the form of a grant, which will not require repayment. It will be secured by a maintenance agreement by which the property owner agrees to maintain all of the improvements paid for by the program. The projected average cost for a façade renovation is \$75,000, but the program will have the flexibility to adjust this amount in order to achieve the program goal of revitalizing the business community on Milton Avenue. It is anticipated that 12 to 15 commercial properties will benefit from the program.
- 2) Staff from Onondaga County Community Development will work with the committee in the selection process, explaining the various requirements of the program and providing technical assistance. The staff architect from Community Development, who has over 30 years experience in restoring commercial façades, will be the lead architect on the project.
- 3) The proposed target area is Milton Avenue from the City line on the east side of the Village to the west end of the Village. Façade improvements will be concentrated on the south side of Milton Avenue.
- 4) Project selection will be based on a number of criteria, including prominent location on Milton Avenue, the historic value of the property, and the contribution that the improvements will make to the overall economic recovery of the target area, with the goal of stabilizing and expanding the Milton Avenue business community. Also and if the building is not currently being used or if the use is to change, then that new use will also be considered in the selection process.
- 5) The projects selected will be subject to public bidding, and construction will be overseen by Community Development Staff.
- 6) When the work is completed, the property owner will execute a maintenance agreement, which requires that all the improvements made be maintained for a period of five years. This document will then be recorded in the Onondaga County Clerk's office.
- 7) A committee comprised of local commercial property owners on Milton Ave. along with local and county officials will be formed to establish a selection process for eligible properties.

**INSTRUCTIONS FOR PROCESSING
VILLAGE OF SOLVAY
COMMERCIAL REHABILITATION PROGRAM APPLICATIONS**

******[All applications need to be submitted prior to September 30, 2015,
in order to be a part of the selection process.]******

Note: If possible please attach a photo of your building.

1. Applicant will return the completed **application** with the property **deed** and all real property **tax receipts** including Town/County, Village, and School **for the last two (2) years** to:

**Toni Kleist, Architect
Onondaga County Community Development
1100 John H. Mulroy Civic Center
Syracuse, NY 13202**

2. The Community Development will check for:
 - a. proof of ownership (deed, etc.);
(If you cannot locate your deed, you may submit the application and our staff will help you locate a copy of your deed.)
 - b. paid property taxes (including Town/County, Village, and School)
 - c. location of property; and
 - d. signed application certification.
4. All applications will be reviewed by the Selection Committee for final selection.
5. All successful applications will be reviewed by the Village Planning Board

Please Note: No work may begin without written approval from Community Development.

VILLAGE OF SOLVAY
COMMERCIAL REHABILITATION

**APPLICATION FOR GRANT
FOR
EXTERIOR BUILDING IMPROVEMENTS**

1. Name of Applicant _____ Date of Application _____
Address of Applicant _____
Telephone Number (Home) _____ (Business) _____

2. Address of Building to be renovated _____
Name of Business (DBA) _____

3. *To be completed by Town Code Enforcement Officer
(after the property is selected for the program)*

I hereby certify that I have inspected the exterior of the above named property, and

___ A. The property has no exterior code violations

___ B. The property has the following exterior code violations:
(attach exterior code violation sheets)

Town Code Enforcement Officer

Date

5. To be completed by Community Development, verification that
Town/County, Village, and School taxes are current at time of application.

Date Verified

**COMMERCIAL REHABILITATION PROGRAM
APPLICATION CERTIFICATION**

6. I, _____, agree to allow a representative
(Property Owner)

of Community Development to inspect my property, located at _____

_____ and prepare cost estimates.

6 A Current use of the property or if a change is intended, then the new use. (Explain below)

7. **Once a property has been selected for participation in the program, then:**

- A preliminary design and cost **estimate** will be decided upon after consultation with the Community Development representative.
- I understand that all work must follow the U.S. Department of Interiors, "Guidelines for Rehabilitation of Historic Buildings" and the New York State Building Code.
- I understand that my construction drawings will be completed by Community Development staff or architects working under their direction and only contractors approved by Community Development will be allowed to bid on this project.
- I understand that work may not begin without written approval from the Community Development Architect. All construction work will be supervised by the CD Architect, who also will authorize all payments to the contractor.
- I will submit proof that all Property taxes are current before work commences. I also understand that taxes will be current upon the completion of the project.

Signature _____ Date _____
(Property Owner)

Village of Solvay Facad Renovation Program Property Maintenance Declaration Form

Program funds granted by Onondaga County Community Development Division, of 1100 John H. Mulroy Civic Center, Syracuse NY 13202 to:

OWNER(S):
PROPERTY ADDRESS:
SECTION/BLOCK/LOT:
AMOUNT OF GRANT ASSISTANCE:
UNIT ASSISTED:
DESCRIPTION OF ASSISTED IMPROVEMENTS:
LEGAL DESCRIPTION SEE SCHEDULE A

This Declaration is made and executed this _____ day of _____, 201__.

WHEREAS, the undersigned is/are the owner(s) (“Owner”) of the premises described above (“Premises”); and

WHEREAS, the Owner acknowledges that the Premises have been improved with Grant Assistance provided by New York State to Onondaga County Community Development Division (“OCCD”) under the VILLAGE OF SOLVAY FAÇADE RENOVATION PROGRAM (“Program”);

NOW, THEREFORE, the Owner hereby declares that for a period of three (5) years (“Regulatory Period”), commencing as of the date hereof and terminating the _____ day of _____, _____, (“Termination Date”), the Premises shall at all times be maintained in good operating order and condition, and all necessary repairs, renewals, replacements, additions and improvements shall, from time to time, be promptly made. Furthermore, during the Regulatory Period, the Owner hereby declares the Premises shall not be sold, moved, demolished or materially altered without the prior written consent of OCCD. This Maintenance Declaration may be assumed by a new owner with the written consent of OCCD. This Declaration is expressly subject and subordinate to any mortgage given by the Owner for the purpose of construction or permanent financing of the Premises, whether or not such mortgage is recorded prior to the date of this Declaration.

All the grants, covenants, terms, provisions and conditions contained herein shall run with the land, binding all subsequent owners, encumbrances and tenants of the Premises. In the event the Owner shall breach any such grant, covenant, term, provision or condition, the Owner must return the full amount of Grant Assistance to OCCD. The amount to be recaptured shall be determined by reducing the original amount of Grant Assistance disbursed to the Owner by one-fifth (1/5th) for each year of the Regulatory Period the Owner was in compliance hereunder. Repayment will be calculated in accordance with the following schedule:

Months 0–12:	100% repayment due.
Months 13–24:	80% repayment due.
Months 25–36:	60% repayment due.
Months 37–48:	40% repayment due.
Months 49–60:	20% repayment due.
Months 60 and beyond:	0% repayment due.

This Declaration shall be recorded in the Office of the Clerk of the County in which the Premises are located, and shall automatically lapse on the Termination Date.

IN WITNESS WHEREOF, this instrument has been signed the day and year set forth above.

OWNER(S):

MAILING ADDRESS:

STATE OF NEW YORK)
COUNTY OF ONONDAGA) ss.:

On the _____ day of _____, in the year 201., before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity (ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

NOTARY PUBLIC

STATE OF NEW YORK)
COUNTY OF ONONDAGA) ss.:

On the _____ day of _____, in the year 201., before me, the undersigned, a Notary Public in and for said State, personally appeared _____, personally known to me or proved to me on the basis of satisfactory evidence to be the individual(s) whose name(s) is (are) subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their capacity (ies), and that by his/her/their signature(s) on the instrument, the individual(s), or the person upon behalf of which the individual(s) acted, executed the instrument.

NOTARY PUBLIC

Record and Return to:
Onondaga County Community Development
1100 Civic Center
Syracuse, New York 13202
20305