

Rec'd 1/26/2023

City of Thomson Façade Grant Application

Name: Watson & Knox Inc. Date: 1/26/2023
(Property Owner/Tenant)

Mailing Address: P.O. Box 539, Thomson, Ga. 30824

Physical Address: 139 Main St., Thomson Ga. 30824

Physical Address of Property: 111 Journal St., Thomson, Ga. 30824

Proposed Plans: Please Attach Sketch.

Detailed architectural plans have been submitted to planning and zoning for prior approval. This renovation project

Windows: has been approved by the Georgia Department of Community Affairs and the U.S. National Park Service in order to

Repointing: certify the historical preservation of the renovation.

Priming and Painting: _____

Signage (Location, Type, and Size): _____

Miscellaneous: _____

Façade Grants must be approved by the Thomson Historic Preservation Commission before any work is started.

NOTE: You must retain all copies of receipts for materials and labor.

I do hereby request a matching grant from the City of Thomson of up to \$ 10,000⁰⁰ for the above project. I understand that monies are reimbursed after approval work is completed. Changes made to the façade that have not been approved by the Historic Preservation Commission will not be funded.

Signature Andrew H. Knox
Printed name: Andrew H. Knox

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Date approved by the Historic Preservation Commission: _____

Date work Completed: _____

Dated Funded: _____ Amount Funded: _____