



Façade Committee  
May 11, 2017 12:00 PM

Members:

David Smith  
Angie Snook  
Marlene Ashpole  
Kelli Decap  
Jim Ries  
Rhonda Ludwig

Contact Person

Rick Mills  
Building Inspector  
309-944-0910

**Agenda**

Roll Call

Pledge of allegiance

Public Comment – *Audience requests are limited to 3 minutes per subject. If additional time would be needed, please contact City Hall to be placed on the Agenda prior to the meeting.*

**Business Items**

- a. Re-Consideration of request by Tom May Company at 101 S. State Street to install a new awning painting and work performed on building, replaced upper decorative molding.
- I. Public Comment
- II. Adjournment



# City of Geneseo, Illinois

- Incorporated February 16, 1865 -

115 S. Oakwood Ave. • Geneseo, Illinois 61254

Phone (309) 944-6419

Fax (309) 944-8254

## COMMERCIAL FAÇADE PROGRAM APPLICATION PACKET

*work completed on  
101 S. State St.*

### BUSINESS OWNER INFORMATION

Business Owner Name: Thomas May

Home Address: 16081 N. 2250 Ave.  
Geneseo IL 61254

Business Name: Tom May's Company  
Painting

Business Address: 16081 N. 2250 Ave.  
Geneseo, IL 61254

Business Phone: 309-944-5239 or 309-212-8663

Fax Number:                         

Home Phone: 309-944-5239

Email Address: TMAY50@Geneseo.net

If tenant, what is the expiration date of your current lease?

we own it

If buyer under contract or tenant, who is the property owner?

Property Owner Name: Thomas May

Property Owner Address: same as above

Property Owner Phone: same

Property Owner Fax:                         

Property Owner E-mail: same

**City of Geneseo**  
**Commercial Façade Improvement Program**  
**Reimbursement Request Certification**

**SUBMITTAL FOR REIMBURSEMENT**

Please submit the following information to the Planning and Development office once approved work is complete for grant payment:

- \* This signed Reimbursement Request Certification
- \* Copies of invoices stamped "PAID" from all contractors, companies, individuals
- \* Proof of payment (limited to copies of canceled checks and/or credit card receipts)
- \* Digital Photos of all building facades visible from the public right-of-way. A signed and notarized Applicant's Affidavit for Reimbursement form provided by the City of Geneseo
- \* Applicant's Affidavit for Reimbursement (Attached)

**CERTIFICATION**

I, the undersigned, warrant that all representations of the application submitted under the program are true and accurate and that there has been no material change which would in itself or cumulatively with other events impair the profitable functioning of my business operation. All agreements, warranties and representations made to the City of Geneseo are true at the time they were made and shall remain true at the time of submittal for reimbursement under the program. The City of Geneseo may in its sole option cancel its assistance commitment either in whole or in part for failure to comply with the requirements of this grant program or applicable City Codes and Regulations.

THOMAS MAYS  
Applicant Name (PRINT)

Thomas Mays  
Applicant Signature

9-29-16  
Date

APPLICANT'S AFFIDAVIT FOR REIMBURSEMENT

STATE OF ILLINOIS )  
 ) SS  
COUNTY OF Henry )

TO: The City of Geneseo

The undersigned, Tom Mays (Name) being duly sworn, deposes and says that he or she is the Owner/Tenant (strike one) of the property located at 101 S. State (the "Premises") and has applied for a façade improvement reimbursement from the Geneseo for awning; upper paint; replace metal (the "Work").

The total amount of the reimbursement approved is \$ 171 toward which I, as Owner/Tenant (strike one), have as of this date paid \$ 776. I hereby attest that I have not received any other funds from a third party to pay for the Work which is paid for by this reimbursement.

The attached proof of payment is true, correct, and genuine, and delivered unconditionally and the work set forth in said proof of payment has been completed and/or the materials set forth in the attached proof of payment has been used in connection with the Work in the Premises.

Upon payment of \$ 171 from the City of Geneseo, there shall be nothing due or to become due from the City of Geneseo in connection with the disbursement of the approved reimbursement amount from the City of Geneseo based on the documentation submitted to the City of Geneseo for the work set forth in said proof of payment.

Date: 9-30-16 Signature: Tom Mays

SUBSCRIBED AND SWORN

to before me this 30 day of

September, 2016  
Paula Swent

Notary Public



**APPLICATION CERTIFICATION**

I, the undersigned, certify that I have read the program description and requirements for the City of Geneseo Façade Improvement Program. I certify that all information provided herein is true and accurate to the best of my knowledge. I understand that the improvements described in this application must receive all required permit approvals from the City of Geneseo prior to the commencement of construction.

Furthermore, I, the undersigned, my successors and assigns, hereby agree to save and hold harmless the City of Geneseo and any of its employees, officers and directors from all cost, injury and damage to any person or property whatsoever, any of which is caused by an activity, condition or event arising out of the performance, preparation for performance or nonperformance of any project improvement included in my application. The above cost, injury, damage or other injury or damage incurred by or to any of the above shall include, in the event of an action, court costs, expenses of litigation and reasonable attorneys' fees.

THOMAS MAYS  
Applicant Name (PRINT)

Thomas Mays  
Applicant Signature

9-29-10  
Date

**CONSENT FROM PROPERTY OWNER (Required if different from Applicant)**

\_\_\_\_\_  
Property Owner Name (PRINT)

\_\_\_\_\_  
Property Owner Signature

\_\_\_\_\_  
Date

.....Office Use Only.....

Application is: \_\_\_\_\_ Approved \_\_\_\_\_ Denied

\_\_\_\_\_  
Review Committee Chair

\_\_\_\_\_  
Date

\_\_\_\_\_  
City Administrator

\_\_\_\_\_  
Date

\_\_\_\_\_  
Planning and Development Director

\_\_\_\_\_  
Date

Double S Masonry & Carpentry  
 18 Edgewood Drive  
 Geneseo, IL 61254

DATE	INVOICE #
11/6/2013	3240

<b>BILL TO</b>
Tom Mays 16081 N. 2250 Avenue Geneseo, IL 61254

TERMS	DUE DATE	PROJECT
Due on receipt	11/6/2013	

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
Labor & Material	Labor and material cost to repair joints on old city building and seal stone walls and repair joints on Village Florist building and install new chimney cap		8,550.00	8,550.00
<p>All guarantees implied or written are void if bill is not paid within 10 days. I understand that any failure to pay as indicated, all guarantees will be void and I will pay all cost of collection including reasonable attorneys fees, court costs, and 1 1/2% interest after 30 days.</p>			<b>Total</b>	<b>\$8,550.00</b>

Double S Masonry & Carpentry  
 1 Edgewood Drive  
 Geneseo, IL 61254

DATE	INVOICE #
10/28/2015	3735

<b>BILL TO</b>
Tom Mays 16081 N. 2250 Avenue Geneseo, IL 61254

TERMS	DUE DATE	PROJECT
Due on receipt	10/28/2015	

ITEM	DESCRIPTION	QTY	RATE	AMOUNT
Labor & Material	Footing repair, fire escape old school, miscellaneous repairs		585.00	585.00
Equipment Rental	Lift rental 1 week		600.00	600.00

**PAID**  
 11/2/15  
 CB #4665

All guarantees implied or written are void if bill is not paid within 10 days. I understand that any failure to pay as indicated, all guarantees will be void and I will pay all cost of collection including reasonable attorneys fees, court costs, and 1 1/2% interest after 30 days.	<b>Total</b>	<b>\$1,185.00</b>
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TOM MAYS AND COMPANY PAINTING CONTRACTOR  
208 E. PARK STREET SUITE 300  
GENESEO, IL 61254

3/01/17

WORK PERFORMED ON CITY HALL BUILDING, 101 N. STATE STREET, GENESEO,IL

PRESSURE WASH OVERHANG, ALL WINDOWS, DOORS AND STONE SURFACES. SCRAPE,AND APPLY  
PRIMER AND 2 TOP COATS OF BENJAMIN MOORE, MOORE GUARD TO ALL PREVIOUSLY PAINTED  
SURFACES, WINDOWS, OVERHANG, ETC.

HOURS, 167 HRS. @ \$ 35.00	\$ 5,845.00
MATERIALS, 11 TUBES CAULK	25.08
8 TUBES MASONRY CAULK	30.32
6 GALLONS PRIMER	224.40
9 GALLONS MOORE GUARD	467.48
<hr/>	
TOTAL LABOR AND MATERIAL BILL	\$ 6,592.28



**Our Heritage of Geneseo**  
**WOOD FLOOR RESTORATION & PROFESSIONAL PAINTING**

**by Trace Lucas**  
**123 North Spring Street**  
**Geneseo, IL 61254**  
**(309) 945-7481**

**Tom Mays's**  
**City Hall project**

<b>A. Labor cost 80 hrs. x 35</b>	<b>\$2,800.00</b>
<b>B. Material (miscellaneous)</b>	<b>45.00</b>
<b>C. Total cost</b>	<b>\$2,845.00</b>

**Thank you for the opportunity to serve you!**

*Trace Lucas*  
9/15/2008

Midwest Awnings Inc.

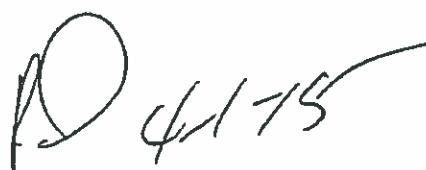
PO Box 1382  
Galesburg, IL 61401

# Invoice

Date	Invoice #
3/25/2015	9122

Bill To
Pat Mays 108 South State Street Geneseo, IL 61254

P.O. No	Terms	Project

Quantity	Description	Rate	Amount
	take rods out of torn valance (101 South State Street)	75.00	75.00
	Sales Tax	7.25%	0.00
			
2% Interest after 30 Days Now accepting Visa & Mastercard			<b>Total</b> \$75.00

# PROPOSAL



**MIDWEST AWNINGS, INC.**

Post Office Box 1382 • Galesburg, Illinois 61402-1382  
 Galesburg - (309)343-5553 • Quad Cities - (309) 762-3339 • Alton - (618) 465-3969  
 Fax 309-343-6837 • www.midwestawningsinc.com

PROPOSAL SUBMITTED TO	DATE <b>2-13-15</b>
ADDRESS	TELEPHONE
	JOB TELEPHONE
JOB NAME AND LOCATION	FAX TELEPHONE
We hereby submit specifications and estimates, subject to all terms and conditions as set forth as follows	PATTERN
	SCALLOP
	BRAID COLOR

101 South State Street  
 Geneseo, IL 61265

Recover awning using existing  
 frame work Sunbrella fabric

\$ 4,561.00

\* price includes all labor  
 and installation

tax \$ 285.36

**COD Terms:** Down payments, balance paid in full upon pick up or prior to installation. If permits are required, it is the responsibility of the customer to make sure any required permits have been obtained and paid for prior to installation. Any cost incurred by not obtaining required permits will be charged to the customer.

WE PROPOSE hereby to furnish material and labor - complete in accordance with above specifications, for the sum of dollars \$ **4,846.36**

1/2 down

Note: This proposal may be withdrawn by us if not accepted with 30 days.

Authorized Signature

**ACCEPTED:** The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above.



**DESCRIPTION OF PROPOSED IMPROVEMENTS**

*New awning  
 Painting and work performed on building,  
 repaired upper decorative molding,  
 etc.*

Please submit current photos and any computer generated or artist renditions of the proposed façade improvement.

**ITEMIZED ACTIVITY DESCRIPTION**

**COST**

<i>Double SS</i>	<i>9735.00</i>	<i>25%</i>	<i>2433.75</i>
<i>Painting</i>	<i>9437.28</i>	<i>25%</i>	<i>2359.32</i>
<i>Awning</i>	<i>4921.36</i>	<i>50%</i>	<i>2460.68</i>

**TOTAL PROJECT COST:**

*24,093.64*

**AMOUNT OF ASSISTANCE REQUESTED:**

*7253.75*