Sweat Equity Grant Program

The Sweat Equity Grant Program (SEG) is a redevelopment initiative funded and administered by the Bayshore/Gateway Triangle Community Redevelopment Agency (CRA) as reimbursement for materials used for exterior improvements to residential properties within the Redevelopment Area.

Overview of the Program

Tenants and owners of residential properties for which property taxes are paid to the current year and which are located within CRA boundaries may be eligible for Sweat Equity Grant funds. Sweat Equity Grant applications are accepted during two cycles each year:

1. May 1 through July 31; and
2. October 1 through December 30.

Once the grant agreement is executed, grantees have 90 days to complete work. Grantees are permitted to use SEG funds as reimbursement for the cost of materials used to improve the exterior of residential properties (buildings and surrounding area) as well as costs for delivery of materials. Total approved project costs must equal a minimum of $500; the maximum grant award is $1,000. Funds are not permitted to be used for “sweat equity,” or cost for labor. This grant program is ideal for CRA residents who want to simply “spruce up” the outside of their homes.

All improvements must be at least partially visible to the public, either from the public right-of-way or some other highly visible location. Grantees generally receive SEG funds in about 45 days after CRA staff visit the site and review all paperwork to verify grantee eligibility (see Required Documentation for Reimbursement below).

Applicant Eligibility

SEG funding is available for single-family, duplex, triplex, quadruplex and mobile home properties within the CRA. Owner-occupied and rental units are both eligible for funding. SEG funds for mobile home properties will only fund improvements to the surrounding area and not to the mobile home itself. Applicants may only submit one application per year per property.

NOTE: Double-Dipping between SEG and SIG Funds

“Double Dipping” between SEG and SIG funding is prohibited. Successful applicants to either the SEG or SIG program may only have one active grant agreement at any given time. When the cumulative total of grant awards reaches $8,000, grantees become ineligible from SIG and SEG funds for three years.
Cost Estimates
For each improvement to be funded applicants must obtain a minimum of two cost estimates. The amount of the grant is determined by the sum of the lowest estimates for materials.

Project Requirements

Eligible Activities
Only exterior improvements are eligible for funding under this program. As such, all improvements must be at least partially visible to the public, either from the public right-of-way or some other highly visible location or remove a threat to health, safety or welfare of persons in the general vicinity. Eligible improvements must do one or more of the following: (1) increase the aesthetic appeal of the area; (2) improve the functionality of the premises; or (3) remedy code violations. Projects requiring permitting are not funded through this program (funding may be available through the Site Improvement Grant). The following are examples of improvements which would be eligible for grant funding:

- Installation of or repair to:
  - Stucco;
  - Doors;
  - Brick or textured pavement;
  - Exterior lighting;
  - Awnings;

- Windows;
- Painting;
- Masonry;
- Shutters; and
- Any other improvement subject to CRA approval.

Examples of other improvements which qualify for grant funding include the following:

- Removal of deteriorated materials;
- Driveway improvements;
- Building cleaning (sand blasting / pressure washing)
- Remediation of code violations; and
- Any other improvement subject to CRA approval.

NOTE: Projects listed below are ineligible for SEG funding:

- The removal of architecturally important details;
- Installation of aluminum or vinyl siding;
- Projects requiring a Collier County permit;
- Landscaping*;
- Work on pools/pool areas;
- Property acquisition;
- Improvements to mobile homes;
- Construction of free-standing buildings (including construction of new rooms to existing structures);
- Any work by contractors;
- Refinancing of debt;
- Non-fixed improvements;
- “Sweat equity”; and
- Improvements commenced prior to executing agreement with CRA.

*Applicants wishing to improve landscape are encouraged to apply for the Landscape Improvement Grant.
Required Documentation for Reimbursement
Grant funds are disbursed after CRA staff verify the improvements are complete. To receive reimbursement, grantees must prove that payment for work was paid DIRECTLY to VENDORS by personal check or credit card in the name of the grantee. Under no circumstance will payment to undocumented vendors be permitted. Grantees must provide receipts or invoices with the payment amount indicated clearly. No reimbursement will be disbursed for work paid for with cash.

Change Orders and Time Extensions

The SEG program is intended to encourage do-it-yourself improvements that do not require permitting and can be performed in a short period of time. Due to the nature of these kinds of projects, there will be no change orders or time extensions permitted.
Appendix A: CRA Map

Map: Location of Bayshore Gateway Triangle CRA

Location of CRA within Collier County

CRA Close-Up

[Map Image showing CRA location within Collier County and close-up view of the CRA area]
### SEG Application
(Detach and submit to CRA office.)

#### Applicant Information

<table>
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<tr>
<th>Grantee Name</th>
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<tbody>
<tr>
<td>Grantee Address</td>
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<tr>
<td>Site Address</td>
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<tr>
<td>Daytime Phone</td>
<td>Alternate Phone</td>
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<tr>
<td>E-Mail Address</td>
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<td>Do you own or lease the property?</td>
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#### Project Information

Describe the existing conditions of the site (attach additional sheets if necessary).

Outline the proposed improvements in detail (attach additional sheets if necessary).

#### REQUIRED ATTACHMENTS FROM APPLICANT:

1) Minimum one estimate for all improvements to be reimbursed.

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**CRA STAFF:**

1) Attach two color photos of each project to be performed.
2) Attach Property Appraiser ID.
3) Attach proof of payment of property taxes.

1) Estimated cost of improvements: $________________
2) Maximum grant award: $_______________

CRA Staff Signature: ________________________________ Date: ________________________
Lessor / Owner Authorization for Improvements

I, ______________________________, owner of the property located at ________________________________, understand that ________________________________, who has a valid lease for the above listed property, has applied for a Sweat Equity Grant and authorize said tenant to complete the improvements listed in the Sweat Equity Grant application and to request reimbursement funds from the Collier County Community Redevelopment Agency.

_______________________________  ___________________
Signature of Owner      Date

_______________________________  ___________________
Signature of Owner      Date
(if jointly owned)

STATE OF _____________
COUNTY OF ___________

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization this ___ day of ________________, 20___, by _________________________________. Such person(s) Notary Public must check applicable box:

☐ are personally known to me.

☐ produced her current driver license.

☐ produced ________________________________ as identification.

(Notary Seal)

Notary Public

Printed Name of Notary: ______________________________

Commission Number: ______________________________

My Commission Expires: ______________________________
Grantee Commitment of Resources
I / we, ____________________________________________________, owner(s) / tenant(s) of the property located at ______________________________, have the funding and ability to begin the site improvements listed above and have the ability to complete all improvements within one year of the approval of the Sweat Equity Grant by the Collier County Community Redevelopment Agency. I / we further affirm that payment for all work on approved improvements will come from accounts in my / our name(s) or the name(s) of entities registered in the State of Florida which I / we have incorporated or otherwise registered with the state (verification is required). Payment for improvements by from persons or entities not a party to this Grant Application is grounds for disqualification.

__________________________________  ____________________
Signature of Tenant (if leased)     Date

__________________________________  ____________________
Signature of Tenant (if leased)     Date
(if jointly leased)

__________________________________  ____________________
Signature of Owner     Date

__________________________________  ____________________
Signature of Owner     Date
(if jointly owned)
Grantee Project Summary & Evaluation (attach additional sheets as necessary)

Project Summary

Describe the improvements you made.

List all vendors providing materials for this project with contact information.

<table>
<thead>
<tr>
<th>Vendor</th>
<th>Phone Number or Address or Website</th>
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Grantee Signature ___________________________________________ Date __________________

Grantee Signature ___________________________________________ Date __________________
CRA Staff: Color photos of completed project from site visit must be attached to this report.
## Payment Request

On ______________________________, the Collier County Community Redevelopment Agency approved funding in the amount of $___________ to cover a portion of the costs listed below through the Sweat Equity Grant program:

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<th>Cost</th>
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**Total**

I hereby confirm that all items listed above have been completed as outlined in the Sweat Equity Grant application submitted to the CRA and authorized by the CRA. Therefore, I am requesting the approved funding in the total amount of $______________ as approved by the CRA.

___________________________________________                       _____________
Grantee Signature                       Date

**STATE OF**
**COUNTY OF**

The foregoing instrument was acknowledged before me by means of □ physical presence or □ online notarization this ___ day of ____________, 2020, by _____________________________. Such person(s) Notary Public must check applicable box:

- □ are personally known to me.
- □ produced her current driver license.
- □ produced __________________________ as identification.

(Notary Seal)

Notary Public
Printed Name of Notary: ____________________________
Commission Number: ______________________________
My Commission Expires: ____________________________
IMPORTANT NOTE: NO REIMBURSEMENT WILL BE PROVIDED WITHOUT ATTACHING THE FOLLOWING: (1) VENDOR/CONTRACTOR INVOICE / RECEIPT AND (2) COPY OF CANCELLED CHECK OR CREDIT CARD VALIDATION TO GRANTEE’S ACCOUNT FOR EVERY REIMBURSABLE EXPENSE.