



City of Buckeye Economic Development Catalyst Program Application Program Year 19-20

Applicant/Business Name: _____ Property/Building Owner: _____

Project Address/Location: _____

Current Zoning District: _____ Parcel Number(s): _____

Year Purchased: _____ Year Built: _____

Name of Tenant: _____ Lease Expiration Date: _____

Total Anticipated Budget: _____

Total Anticipated Financial Request: _____

Will this project require any City permits? Yes No

Please describe: _____

(For permit information, please contact the City of Buckeye at (623) 349-6200)

If you are not the building owner, do you have permission from the building owner to make the described improvements? Yes No

Estimated start date _____

Estimated completion date _____

Applicant Name: _____

Company/Business: _____

COB Business License Number: _____

Phone: _____ Fax: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Contractor: _____

Company: _____

AZ/Buckeye License Number: _____

Phone: _____ Fax: _____

E-mail: _____

Address: _____

City: _____ State: _____ Zip: _____

Economic Development Department

530 E. Monroe Avenue, Buckeye AZ 85326 Phone 623.349.6973 growbuckeye.com

*Site Plan may be required



City of Buckeye
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BUDGET

(anticipated; including soft costs, hard costs and in-kind labor if applicable)

ACTIVITY	ESTIMATED COST
Example: Landscaping, bushes, trees	\$550.00
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL ANTICIPATED AWARD:	\$

PLEASE ATTACH THREE (3) COMPARABLE WRITTEN BIDS FOR THE PROJECT
 (Bids for grant requests less than \$4,999 not required but are encouraged)

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PLEASE ATTACH A 8.5" X 10" (or smaller) COLOR PICTURE OF EXISTING BUILDING/PROPERTY:

Economic Development Department

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City of Buckeye Economic Development Catalyst Program Application

The City of Buckeye will review all Applications. Awards are approved at the sole discretion of the Mayor and City Council.

I, _____, hereby make an Application to the City of Buckeye for the Economic Development Catalyst Program Award in the anticipated amount of \$_____. I understand that the City must approve my Application. I further understand that these monies are NOT GUARANTEED and if I fail to meet any of the rules, regulations, or guidelines outlined in the Economic Development Catalyst Program Process Guide, I forfeit the right to receive reimbursement for any and all work performed on my property. If approved, I understand that all work performed must comply with all City of Buckeye Building and Development Codes, as amended.

Applicant Signature

Date

Property Owner Signature

Date

Please return the completed Application to:

City of Buckeye
530 East Monroe Avenue
Buckeye, AZ 85326

Phone: (623) 349-6973
thiller@buckeyeaz.gov