A close up of a logo

Description automatically generated

**ADBA GLASS GRANT APPLICATION**

NAME OF BUSINESS: \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NAME OF PERSON APPYLING FOR THE GRANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OWNER: MANAGER:

PROPERTY ADDRESS: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ EMAIL CONTACT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GRANT OPTION APPLYING FOR – 1 OF 2

1. FOR 50% OF GLASS **INSURANCE DEDUCTIBLE** UP TO MAXIMUM OF $150:

AMOUNT APPLYING FOR $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

OR

1. 50% OF GLASS **REPAIRS** TO MAXIMUM OF $150 (if no insurance):

AMOUNT APPYLYING FOR $\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PLEASE NOTE**: MAXIMUM AMOUNT ELIGIBLE FOR THE ADBA GLASS REPAIR GRANT: $150.00

GLASS WAS BROKEN ON (date): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

GLASS REPAIRED ON (date must be within 2 weeks of breakage):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PICTURE OF BREAKAGE INCLUDED IN APPLICATION

PLEASE ATTACH COPY OF GLASS INSURANCE SHOWING DEDUCTIBLE & RECEIPT OF REPAIRS

RECEIPT ATTACHED

**LIST INSURANCE COMPANY WITH DEDUCTIBLE COST (IF APPLICABLE) AND GLASS REPAIR COST:**

|  |  |  |  |
| --- | --- | --- | --- |
| INSURANCE COMPANY | AMOUNT OF  DEDUCTIBLE | COMPANY  Repaired Glass | AMOUNT  Cost of Repairs |
|  |  |  |  |
|  |  |  |  |

I have read the ADBA Grant Glass Guidelines and agree to the terms as outlined

SIGNATURE OF APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: