



**Business Name:** \_\_\_\_\_

**Owner's Name(s):** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**Amount of funding requested: \$** \_\_\_\_\_

**Provide a complete description of the planned improvements and how you believe they will enhance the level of security and safety of your business:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Attach the recommendations provided by the Hampton Police following their Security Survey / CEPTED Assessment.**

**Will the project require any special permits?                      YES                      NO**

**Please describe:** \_\_\_\_\_

\_\_\_\_\_

**For permit information, please contact Hampton's Central Permit Office at 728-2444.**

**Provide a breakdown of project budget:**

Total project cost: \$ \_\_\_\_\_ (please complete the project cost breakdown below.)

<u>Expenses</u>	<u>Amount</u>
Design.....	\$ _____
Installation.....	\$ _____
Materials/Equipment.....	\$ _____
Other _____	....\$ _____

<u>Funding Sources</u>	<u>Amount</u>
Business Owner.....	\$ _____
Coliseum Central.....	\$ _____
Other _____	....\$ _____

