



COMMERCIAL CATALYST PROGRAM REQUEST FORM

Derby Project Space		Oct 15 2025	
Business Name		Date	
6525 East 72nd Place	Commerce City	CO.	80022
Business Street Address	City	State	Zip Code
720-838-5151		marksinkphoto@gmail.com	
Business Phone	Business Fax	Business E-Mail Address	

Property Owner/Tenant Name

☒ Property Owner

☐ Tenant

3035 Wyandot St	Denver	CO.	80211
Owner/Tenant Street Address	City	State	Zip Code

Owner/Tenant Phone	Owner/Tenant Fax	Owner/Tenant E-Mail Address
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Estimate or quote of total project cost (attach estimates): \$ 6700.

Amount of Catalyst Program fund request*: \$ 6,700

**Applicant will be reimbursed for no more than 50% of the total completed project cost or an amount approved by the Derby Review Board, whichever is less.*



ACKNOWLEDGMENT OF APPLICATION PROVISIONS

- ☒ I affirm that this project will not be initiated without written commitments and completed contracts with the City of Commerce City.
- ☒ I affirm that this project conforms to all codes, ordinances, and regulations as well as the common design principles established for the Catalyst Program.
- ☒ I affirm that all applicable permits will be obtained for this project and all accompanying inspections will be successfully completed in order to receive reimbursement.
- ☒ I affirm that I am in good standing with the City of Commerce City with respect to taxes, fees, loans, or other financial obligations to the city.
- ☒ I agree that if this project is selected for a grant from the City of Commerce City, photographs of my property may be used in promotional materials for the commercial Catalyst Program.
- ☒ I affirm that the requisite materials are included with this submittal.
- ☒ I understand that in some cases, an architect and/or engineer must prepare documents for building permit approval.
- ☒ I understand that all applicable permits must be obtained, and all accompanying inspections must be successfully completed.
- ☒ I understand that all project-related invoices must be submitted for review at conclusion of the project prior to reimbursement. In addition, approved copies of required city building permits must be submitted as a condition of reimbursement.



Applicant's Printed Name & Signature

Oct 27 2025

Date

Commerce City Representative

Date

I understand that all project-related invoices must be submitted for review at conclusion of project prior to reimbursement. In addition, approved copies of required city building, sign, and fence permits must be submitted as a condition of reimbursement.

FOR OFFICE USE ONLY

Date Project Initiated

Date Project Completed