

COMMERCIAL BUILDING FACADE IMPROVEMENT GRANT PROGRAM APPLICATION FORM

(Last Revised July 30, 2012)

A. General Information and Instructions

- 1. Before filling out this application form, please read the attached Program Guide and arrange for a pre-application meeting with staff. The Program Guide describes the purpose and basic terms and conditions of the Commercial Building Façade Improvement Grant Program.
- 2. If an agent is acting on behalf of the property owner in making this application, please ensure that the required authorization is completed and signed by the owner as provided in Section E of the application form.
- 3. If the applicant is not the property owner, please ensure that written authorization from is obtained by the applicant from the property owner to make this application and that said written authorization is attached to the application form.
- 4. If you find insufficient space on this form to respond to questions, please provide additional information on a separate page and attach to your completed application form.
- 5. Please attach to this application the required supporting documents as requested by Township staff. An application will not be considered complete until all required documents have been submitted.
- 6. Please ensure that the application form is complete and all required signatures have been supplied.
- 7. Please print (black or blue ink) or type the information requested on the application form.
- 8. You may deliver your application in person or send it by mail to:

Township of West Lincoln Clerks Department 318 Canborough St. P.O. Box 400 Smithville, ON. LOR 2A0

Attention: Carolyn Langley, Clerk

9. For further information on this program, please contact Brian Treble, Director of Planning and Building, at (905) 957-5138 or via e-mail at btreble@westlincoln.ca

PLEASE PRINT		Application No
В.	Applicant Information	(Office Use Only)
Date	:	
Nam	e of Registered Property Owner	
Maili	ng Address of Property Owner	
Telep	ohone Number	
Fax I	No	
E-ma	ail	
	e of Applicant if different from stered Property Owner	
	ng Address of Applicant if different Registered Property Owner	
Telep	phone Number	
Fax I	No	

E-mail

Agent Information	(if any)	
Name of Agent		
Mailing Address		
Telephone Number		-
Fax No		<u>-</u>
E-mail		
Solicitor's Informat	tion	
Name		
Mailing Address		
Telephone Number		-
Fax No		
E-mail		

C. Property Information

Municipal Address of Property for Which This Application is	Being Submitted	
Assessment Roll Number		
Legal Description of Property (Lot and Plan Numbers)		
Existing Property Use		
Is property designated under Part IV of the Ontario Heritage	Act? Yes	No
Are property taxes paid in full on this property?	Yes	No
Are there any outstanding work orders on this property?	Yes	No
Size of Property acres		
Existing Buildings on Property? Yes(if yes, specify build	ding size below)	No
Building 1 sq.ft.		
Building 2 sq.ft.		
Building 3 sq.ft.		

D. Project Description

ťhe	Please describe the facade improvement/restoration we matching grant (see the attached Program Guide for the orks")	
	Cost Summary - Eligible Facade Improvement/Restorate detailed costs estimates from bona fide contractors for	
Ту	pe of Improvement/Construction	Cost Estimate (\$)
a.	Eligible Facade Improvement/Restoration Works (insert lowest cost estimate)	
b.	Other sources of government funding? (includes Federal, Provincial, Municipal, Municipal Heritage Committee, CMHC)	
C.	Total Eligible Costs (a-b)	,
d.	Amount of Grant Applied For: (50% cost item c above to permitted maximum identified in the Program Guid	

iii) Construction Schedule

pleted within	one (1) yea	ar of grant	
ı		,	
_ am the ow	ner of the la	and that is subj	ect of this
agent/solicito	or		to
behalf in reg	ard to this a	application.	
, this	of	Month ,	
_	Signatur	e of Owner	
	am the owagent/solicito	am the owner of the lagent/solicitor behalf in regard to this a , this of	am the owner of the land that is subjagent/solicitorbehalf in regard to this application, thisof

If an agent is authorized in Section F above, all correspondence will be sent to the authorized agent. If no agent is authorized in Section F above, all correspondence will be sent to the Applicant.

F. Sworn Declaration

I/WE HEREBY APPLY for a grant under this program.

I/WE HEREBY AGREE to abide by the terms and conditions of the grant program.

I/WE HEREBY AGREE to enter into a grant agreement with the Township that specifies the terms and conditions of the grant.

I/WE HEREBY CERTIFY that the information contained in this application is true, correct and complete in every respect and may be verified by the Township by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

I/WE HEREBY GRANT permission to the Township, or its agents, to inspect my/our property that is subject of this application.

I/WE HEREBY AGREE that if any statements or information in this application or submitted in support of this application are untrue, misleading or there is a material omission, the application may be rejected or not approved, or the grant may be delayed, reduced, cancelled or repayment may be required.

I/WE HEREBY AGREE that the grant may be delayed, reduced or cancelled if the work is not completed, not completed as approved, or if the contractors are not paid.

I/WE HEREBY AGREE the program for which application has been made herein is subject to cancellation and/or change at any time by the Township in its sole discretion, subject to the terms and conditions specified in the Program. Participants in the program whose application has been approved and who have entered into a grant agreement with the Township will continue to receive their grant, subject to their grant agreement.

I/WE HEREBY AGREE all grants will be calculated and awarded in the sole discretion of the Township. Notwithstanding any representation by or on behalf of the Township, or any statement contained in the program, no right to any grant arises until it has been duly authorized, subject to the applicant meeting the terms and conditions of the program and the grant agreement. The Township is not responsible for any costs incurred by the Owner/Applicant in any way relating to the program, including, without limitation, costs incurred in anticipation of a grant.

Dated at the		, this _		_ of		
Т	ownship/Town of)		Day		Month	Year
Name of Owne Agent	r or Authorized Agent			Signa	ture of Ow	ner or Authorized