

TOWNSHIP OF CENTRAL FRONTENAC — SHARBOT LAKE COMMUNITY IMPROVEMENT PLAN (CIP)

APPLICATION FORM

** Please Print in Black or Blue ink **

Appl	icatio	า No.		
(Offic	e Use	Only)	

Section 1.0 Applicant Information		
1.1 Name of Registered Property Owner:		
Surname	Given Name	Phone No.
Address	Postal Code	Email
1.2 Name of Tenant (If Applicable)		
Surname	Given Name	Phone No.
Address	Postal Code	Email
1.3 Name of Agent/Applicant		
Surname	Given Name	Phone No.
Address	Postal Code	Email
Section 2.0 Property Information		
2.1 Municipal Address		
•		
2.2 Legal Description		
2.3 Assessment Roll #		
2.4 Existing Use		
Section 3.0 Project Specific Inform	nation	
3.1 Provide a detailed description (building proposed development to take place on the proposed improvements.		
3.2 Estimated Value of Construction		
3.3 Proposed start date of construction		



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3.4 Proposed completion date of construction	

Section 4.0 Community Improvement Plan (CIP) Incentive Program Type

Please indicate v	vhich Pro	gram(s) appl	y for the propose	d development:			
Program Type	Check All That Apply			velopment meet tl ike CIP for a detail		Cost of project (labour and materials, excluding HST)	Total Eligible Costs (Staff use only)
Façade Improvement Program							
Accessibility Enhancements Grant							
Business Startup Funding							
Community Improvement Loan Program							
Municipal Fees Grant Program							
Have you applied for or will you be obtaining any other sources of government funding? (includes Federal, Provincial, etc) Yes No I							
Program Name		Approval No.	nent iunuliig.	Dollar Value	<u> </u>		
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Section 6.0 Affidavit or Sworn Declaration

Agent Authorization and Information If the registered property owner is authorizing an agent to act on his/her behalf in making this application, please complete and sign this section. If an agent is authorized, all correspondence will be sent to the authorized agent. If no agent is authorized, all correspondence will be sent to the property owner. am the owner of the land that is subject of this application, and I hereby authorize my agent/solicitor_____ _____ to make this application and to act on my behalf in regard to this application. Dated at the___ _____ this____ of ___ Day Name of Owner Signature of Owner Affidavit or Sworn Declaration that the Information is Accurate (To be completed at the time of application) _____ solemnly declare that the _____ of the ____ information contained in the application is true and I make this solemn declaration conscientiously believing it to be true and knowing that it is of the same force and effect as if made under Oath and by virtue of The Canada Evidence Act. I acknowledge that all information provided on this form (with the exception of personal information), including supporting documentation, is collected under the authority of the Planning Act, and Municipal Act, and will be accessible to the public and governmental and technical agencies for review. Sworn (or Declared) before me in the _____ this ______ , 20 _____ Commissioner of Oaths Applicant

PERSONAL INFORMATION CONTAINED ON THIS APPLICATION IS COLLECTED PURSUANT TO THE PLANNING ACT AND WILL BE USED FOR THE PURPOSE OF PROCESSING, AND FOR THE APPROVAL OF APPLICATIONS UNDER THE SHARBOT LAKE COMMUNITY IMPROVEMENT PLAN.