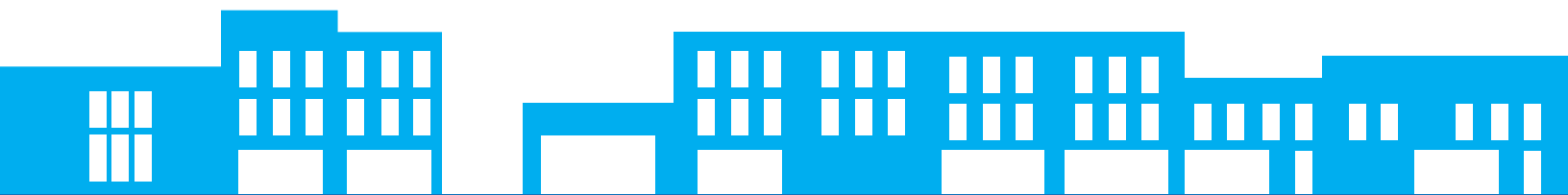


**CENTRAL AREA**  
COMMUNITY IMPROVEMENT PLAN

**DOWNTOWN BRAMPTON**  
FACADE IMPROVEMENT PROGRAM

**PROGRAM APPLICATION FORM**



## A. General Information and Instructions

1. Before filling out this application form, please read the Program Implementation Guidelines and arrange for a pre-application meeting with staff. The Program Implementation Guidelines describes the purpose and basic terms and conditions of the Façade Improvement Program.
2. If the applicant is not the registered owner please ensure that the required authorization is completed and signed by the registered owner as provided in Schedule A.
3. 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.
4. Please attach all requested supporting documentation to the application.
5. Please ensure that the application form is complete and that all required signatures have been supplied. **The application must include a signature by a commissioner of oaths/affidavits in the Declaration section. For convenience, a limited service is available at City Hall (Clerks Division), although the signature of any commissioner is acceptable. The City commissioner's availability is Tuesdays from 2:00 to 4:30 and Thursdays from 8:30 to 10:00. A \$35 fee shall apply for this service.**
6. Please print (black or blue ink) or type the information requested on the application form.
7. You may deliver your application in person or send it by mail to:  
City Of Brampton  
Planning and Development Services Department  
Development Services Division, 3<sup>rd</sup> Floor City Hall  
2 Wellington Street West  
Brampton, ON L6Y 4R2  
**Attention: David VanderBerg, Manager, Planning & Development Services**

***For further information on this program, please contact:***

***Arjun Singh***  
***Development Planner,***  
***Planning & Development Services***  
***(905) 874-2254***  
***[arjun.singh@brampton.ca](mailto:arjun.singh@brampton.ca)***

***David VanderBerg, MCIP, RPP***  
***Manager, Planning & Development***  
***Services***  
***(905) 874-2051***  
***[david.vanderberg@brampton.ca](mailto:david.vanderberg@brampton.ca)***

Central Area Community Improvement Plan  
 Façade Improvement Program  
 Program Application Form

<b>(Office Use Only)</b>	<b>CITY APPLICATION NO.:</b>  P75 CE FA ____ - ____
	<b>DATE RECEIVED:</b>  _____
	<b>OTHER ASSOCIATED CITY FILES:</b>  
<b>NOTE:</b>	<b>SEND COPY OF APPLICATION TO FINANCE DEPARTMENT AND LEGAL SERVICES</b>

**B. Applicant Information**

	Name and Address	Phone/Fax/Email
<b>Applicant:</b>		<b>P:</b>
		<b>F:</b>
		<b>E:</b>
<b>Registered Owner: (if different Applicant)</b>		<b>P:</b>
		<b>F:</b>
		<b>E:</b>
<b>Solicitor (If any):</b>		<b>P:</b>
		<b>F:</b>
		<b>E:</b>

**C. Property Information**

**C.1 Municipal Address(es) of Property for Which This Application is Being Submitted**


**C.2 Roll Number(s)** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C.3 Legal Description of Property (Lot and Plan Numbers)**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**C.4 Describe Existing Property Use including height of building(s) and types of uses:**

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**C.5 Is property designated under Part IV of the Ontario Heritage Act?**

Yes  No

**C.6 Are there any outstanding work orders on this property?**

Yes  No

**D. Property Tax Information**

**D.1 Is this property in tax arrears?** Yes  No

**D.3 If yes, specify value of tax arrears:** \$ \_\_\_\_\_

**E. Project Description**

**E.1 Please describe the proposed facade improvement/restoration works that are eligible for the matching grant (see the attached Program Implementation Guidelines for the definition of “eligible works”)**

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**E.2 Cost Summary - Eligible Façade Improvement/Restoration Works (please attach two detailed costs estimates from bona fide contractors for work to be performed).**

Work	Cost Estimate 1(\$)	Cost Estimate 2(\$)
a) Eligible Façade Improvement/Restoration Works		
b) Associated Architectural Design Fees (Max 10% of Grant Amount)		
c) Associated Landscaping (Max 15% of Grant Amount)		
d) Other sources of government funding? (includes Federal, Provincial, Municipal, Municipal Heritage Committee, CMHC)		
Total Eligible (a+b+c-d)		
Maximum Grant Amount (50% of Eligible Up to Max Allowable)*		

\*see Section 2.4.4 of Façade Improvement Program Implementation Guidelines

**E.3 Construction Schedule**

(Construction of all works must be completed within one (1) year of grant advancement)

Approximate Start Date of Construction \_\_\_\_\_

Approximate End Date of Construction \_\_\_\_\_

## F. General Requirements

The Applicant acknowledges that it is applying for a grant under the Central Area Community Improvement Plan – Façade Improvement Program, and if approved shall enter into an agreement to abide by the terms and conditions of the grant program, including but not limited to the following:

- A grant shall not be made pursuant this application until all requirements for a grant have been met in full and the applicant has entered into a grant agreement with the City which specifies the terms and conditions under which the grant is made.
- 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.
- 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.
- The program for which application has been made herein is subject to cancellation and/or change at any time by the City 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 City will continue to receive their grant, subject to their grant agreement.
- All grants will be calculated and awarded in the sole discretion of the City. Notwithstanding any representation by or on behalf of the City, 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 City is not responsible for any costs incurred by the applicant in any way relating to the program, including, without limitation, costs incurred in anticipation of a grant.

The applicant certifies that the information contained in this application is true, correct and complete in every respect and may be verified by the City by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

The applicant hereby grants permission to the City, or its agents, to inspect the subject property.



(Please print)

Dated at the \_\_\_\_\_, this \_\_\_\_\_ of \_\_\_\_\_,  
(City/Town of...) Day Month Year

\_\_\_\_\_  
Name of Registered Owner or Applicant

\_\_\_\_\_  
SIGNATURE & TITLE

\_\_\_\_\_  
Signature of Registered Owner or Applicant  
I/we have authority to bind the Corporation

**NOTE: If the Registered Owner is a firm or corporation, affix the corporate seal or provide proof of legal corporate name.**

### STATUTORY DECLARATION

I, \_\_\_\_\_, of the City of \_\_\_\_\_, in the Regional Municipality of \_\_\_\_\_,

DO SOLEMNLY DECLARE that:

1. I am the Registered Owner of the Property,  
the Applicant for the Registered Owner of the Property  
the \_\_\_\_\_ of \_\_\_\_\_, the Registered Owner of the  
Property,  
[Office/Title] [Name of corporation]  
[Delete inapplicable statements]

and as such I have knowledge of the facts herein declared.

2. All of the statements in this Application are 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.

DECLARED before me at the City )  
of , in the Regional )  
Municipality of , )  
this day of , 20 . )  
)  
)

\_\_\_\_\_

A Commissioner, etc.

**NOTE: If the Registered Owner is a firm or corporation, affix the corporate seal or provide proof of legal corporate name.**

## SCHEDULE A

### APPOINTMENT AND AUTHORIZATION OF APPLICANT

To: Commissioner, Planning and Development Services  
City of Brampton  
2 Wellington Street West  
Brampton, ON  
L6Y 4R2

LOCATION OF THE SUBJECT LAND: \_\_\_\_\_

I/We, \_\_\_\_\_  
Please print/type the full name of the Registered Owner(s)

the undersigned, being the Registered Owner(s) of the subject lands, hereby authorize

\_\_\_\_\_  
Please print/type the full name of the applicant(s)

to make application to the City of Brampton Planning and Development Services Department in the matter of an application under the Central Area Community Improvement Plan Facade Improvement Program with respect to the subject land.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20

\_\_\_\_\_  
Signature of the Registered Owner(s), or where the Registered Owner is a corporation, the signature of an officer of the Registered Owner.

I/we have authority to bind the Corporation

\_\_\_\_\_  
where the Registered Owner is a firm or corporation, please print or type the full name of the person signing.

**NOTE: If the Registered Owner is a firm or corporation, affix the corporate seal or provide proof of legal corporate name.**

## SCHEDULE B

### PERMISSION TO ENTER

To: Commissioner, Planning and Development Services  
City of Brampton  
2 Wellington Street West  
Brampton, ON  
L6Y 4R2

LOCATION OF THE SUBJECT LAND: \_\_\_\_\_

I/We, \_\_\_\_\_  
Please print/type the full name of the Registered Owner(s)

The undersigned, being the Registered Owner(s) of the subject land, hereby authorize City of Brampton staff members, to enter upon the above noted property for the purpose of conducting a site inspection with respect to the attached application under the Central Area Community Improvement Plan Façade Improvement Program.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20

\_\_\_\_\_  
Signature of the Registered Owner(s), or where the Registered Owner is a corporation, the signature of an officer of the Registered Owner.

I/we have authority to bind the Corporation

\_\_\_\_\_  
where the Registered Owner is a firm or corporation, please print or type the full name of the person signing.

**NOTE: If the Registered Owner is a firm or corporation, affix the corporate seal or provide proof of legal corporate name.**