



Façade Improvement Program Grant Application



PH: 519-842-9200 FX: 519-688-0759

For use by Principal Authority (Town of Tillsonburg)				
Date Received:		Permit/ Application number:		
Application submitted to <u>TOWN OF TILLSONBURG – 10 Lisgar Ave. Tillsonburg, ON. N4G 5A5</u>				
****ALL SECTIONS AND INFORMATION MUST BE COMPLETED IN ORDER FOR US TO PROCESS YOUR APPLICATION****				
A. Project Information				
Building number, street name			Unit number	
TOWN OF TILLSONBURG	Postal code	Existing use(s):	Proposed use(s):	
Has the subject property been designed under the Ontario Heritage Act, R.S.O 1990, c. 0.18? ☐ Yes ☐ No				
Which facades are to be improved and what is/are the approximate surface area(s) ☐ Front _____ ○ ft ² / ○ m ² ☐ Rear _____ ○ ft ² / ○ m ² ☐ Side _____ ○ ft ² / ○ m ²				
Please choose the appropriate measure, square feet (ft ²) or square metres (m ²).				
Description of the proposed façade improvement works:				
B. Applicant is: ☐ Owner or ☐ Authorized Agent of Owner				
Last name		First name		Corporation or partnership
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number ()	Fax ()	Cell number ()		
C: Owner (if different from applicant)				
Last name		First name		Corporation or partnership
Street address			Unit number	Lot/con.
Municipality	Postal code	Province	E-mail	
Telephone number ()	Fax ()	Cell number ()		

Notice of Collection:

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D. Quotes					
Name of contractor providing the quote:				Total amount of quote (incl. taxes):	
1.				\$	
2.				\$	
E. Consultant					
Last name:		First Name:		Corporation or Partnership	
Street Address, Municipality, Postal Code:					
Contact Phone Number:			Contact E-Mail:		
Consultant Approval:					
Signature: _____ Date: _____					
F. Property Owner's Authorization (to be completed if an agent and/or tenant is used to represent the owner)					
I _____ being the registered owner of the subject land hereby authorize (print name) _____ to prepare and submit this Application for a Façade Improvement Grant. (print name)					
_____ Date		_____ Signature of Owner			
G. Declaration of Applicant					
I _____ declare that: (print name)					
1. The information contained in this application, attached plans and specifications, and other attached documentation is true to the best of my knowledge					
2. If the owner is a corporation or partnership, I have the authority to bind the corporation or partnership.					
3. Property taxes in good standing ☐ YES ☐ NO					
4. Outstanding work orders on property ☐ YES ☐ NO					
5. Existing municipal loan/grant program ☐ YES ☐ NO					
The undersigned hereby applies for a Grant in accordance with the application, drawings, specifications and quotes herewith submitted and acknowledges that the proposed work must comply with the provisions of the Building Code Act, the Ontario Building Code, any other statutes or regulations of the Province of Ontario, and all by-laws of the Town of Tillsonburg/Tillsonburg BIA. I certify the truth of all statements or representations contained herein.					
I/WE HEARBY AGREE that the program for which application has been made herein is subject to availability of funding, cancellation, and/or change at any time by the Town of Tillsonburg/Tillsonburg BIA in its sole discretion.					
I/WE HEARBY AGREE all grants will be calculated and awarded in the sole discretion of the Town of Tillsonburg/Tillsonburg BIA. Notwithstanding any representation by or on behalf of the Town of Tillsonburg/Tillsonburg BIA, 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 Town of Tillsonburg/Tillsonburg BIA 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 the grant.					
_____ Date		_____ Signature of Applicant			

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Application Eligibility & Submission Guidelines

Please fill out the following checklist in order to accelerate the Application process

Please refer to the Design and Procedural Guidelines.

Items Required for Complete Application		Notes	
Fully completed application form	☐		
Photographs of existing building	☐		
Details on building materials to be used	☐		
Detailed drawings of planned work	☐		
Details on colours to be used (paint, brick/stone colour, stucco, etc.)	☐		
Architectural detailing	☐		
General renovation details	☐		
Schedule 1: Quotation form completed for each contractor	☐		
Two (2) independent itemized quotes from qualified contractors*	☐		
Additional Items, if Applicable for Approval		N/A	Notes
Window and door type	☐	☐	
Signage	☐	☐	
Exterior lighting	☐	☐	
Awnings	☐	☐	

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Schedule 1: Quotation – To Be Completed by Contractor One

A. Project Information					
Building number, street name			Unit number		
Owner Name:			Business Name:		
City:		Postal code	Other description		
B. Contractor					
Last name		First name		Corporation or partnership	
Street address				Unit number	Lot/con.
Municipality	Postal code	Province	E-mail		
Telephone number ()	Fax ()			Cell number ()	
To Whom It May Concern; I, _____ of the contracting firm _____ hereby submit this quote, in writing to perform the work set out in the attached plans, specifications, and Schedule of Improvements, prepared for the above property. In all cases work shall be performed in a workmanlike and professional manner to undertake improvements to the front façade of the building. The following quote provides an estimate of the work to be performed. \$ _____ Construction Estimate (incl. HST) Approximate Start Date Approximate End Date _____ Date Signature of Contractor					

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Schedule 1: Quotation – To Be Completed by Contractor Two

A. Project Information							
Building number, street name			Unit number				
Owner Name:			Business Name:				
City:	Postal code		Other description				
B. Contractor							
Last name		First name		Corporation or partnership			
Street address				Unit number Lot/con.			
Municipality	Postal code	Province	E-mail				
Telephone number ()	Fax ()		Cell number ()				
To Whom It May Concern; I, _____ of the contracting firm _____ hereby submit this quote, in writing to perform the work set out in the attached plans, specifications, and Schedule of Improvements, prepared for the above property. In all cases work shall be performed in a workmanlike and professional manner to undertake improvements to the front façade of the building. The following quote provides an estimate of the work to be performed. \$ _____ <table><tr><td>Construction Estimate (incl. HST)</td><td>Approximate Start Date</td><td>Approximate End Date</td></tr></table> Date _____ Signature of Contractor _____					Construction Estimate (incl. HST)	Approximate Start Date	Approximate End Date
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