



**APPLICATION FOR GRANT/LOAN
BROWNFIELD
under the COMMUNITY IMPROVEMENT PLAN**

A Complete Application consists of:

- One complete application form signed by appropriate parties
- One copy of the deed of property
- Photographs of the existing building/historical photographs
- A heritage impact statement for designated or eligible properties
- A site plan and/or professional design/study/architectural drawings
- Specification of the proposed works, including a work plan for the improvements to be completed and construction drawings
- Estimated project construction costs, including and itemized listing of said costs
- Environmental reports and/or Record of Site Conditions, as necessary

Applicant:	Property Owner (if different than applicant):
Address:	Address:
Telephone:	Telephone:
Email:	Email:

Design Consultant:	Other Consultant:
Address:	Address:
Telephone:	Telephone:
Email:	Email:

Incentive Request	Criteria (refer to By-law for clarification)	✓	Requested Amount (if applicable)
Brownfield Development Grant – Phase I	One time grant up to 50% Maximum \$5,000		
Brownfield Development Grant – Phase II	One time grant up to 50% Maximum \$10,000		
Brownfield Development Tax Cancellation Program	Cancellation of municipal portion of property tax for up to 3 years.		
	Cancellation of the education property tax increase up to 3 years, if approved by the Minister of Finance		
Brownfield Development Tax Assistance Program	Tax break with escalating scale over 4 years		
Brownfield - Permit/Application Fees Grant	One time grant maximum \$500		

Property Information:			
Street or Property Address (if applicable):			
Legal Description including any reference plans:			
Frontage: _____	Depth: _____	Area: _____	_____

Existing Use:	
Proposed Use:	
Is the property designated under the Ontario Heritage Act?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are property taxes paid in full on this property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are water/sewer accounts paid in full on this property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Are there any outstanding work orders on this property?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If you are undertaking the work yourself, you may not request a grant/loan for labour, however, you may request a grant/loan for materials and supplies.	

Phase I		
Phase II		
Tax Cancellation Program	<p>Has a Phase I and/or Phase II been completed? If yes, please indicate the name of the first and date the Study was completed.</p> <p>Phase I: _____</p> <p>_____</p> <p>Phase II: _____</p> <p>_____</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Is the remediation/risk assessment estimated to be more than \$50,000?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	Estimation of remediation work	\$
Tax Assistance Program	<p>Has a Record of Site Condition been applied/granted by the Ministry of Environment? If yes, please indicate the date.</p> <p>MOE Submission Date: _____</p> <p>MOE Approval Date: _____</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>Have you applied for any other sources of government and/or non-profit organization that can be applied against the eligible costs are anticipated or have been secured?</p> <p>If yes, please specify funding agency and amount of financial assistance received:</p> <p>_____</p> <p>_____</p>		<input type="checkbox"/> Yes <input type="checkbox"/> No

Itemized Quotes shall be submitted, where applicable	Contractor Name/Address	Quote Amount (Including HST)
Quote 1		
Quote 2		
Quote 3		

Eligible Cost:	Actual/Estimated Cost
Building Demolition	\$
Building rehabilitation and retrofitting	\$
On-site infrastructure upgrading (i.e: on-site water sewers, sanitary sewers, stormwater management)	\$
Off-site infrastructure upgrading (i.e: off-site water services, stormwater management, electric and gas utilities)	\$
Total Eligible Construction/Rehabilitation Costs	\$

Construction Schedule:	
Approximate Start Date of Demolition of Existing Buildings	
Approximate End Date of Demolition of Existing Buildings	
Approximate Start Date of Rehabilitation/Construction	
Approximate End Date of Rehabilitation/Construction	

DECLARATION OF QUALIFIED PERSON

A Phase II Environmental Site Assessment (ESA) has been conducted on the property described in this application, and as of the date of the Phase II ESA was completed, this property did not meet the standards that must be met under subparagraph 4i of Subsection 168.4 (1) of the Environmental Protection Act to permit a record of site condition to be filed under that subsection in the Environmental Site Registry.

Name of Qualified Person (please print)

Signature of Qualified Person

Title

Company Name

AUTHORIZATION BY OWNER

I, the undersigned being the owner of the subject land of this application for a grant/loan, hereby authorize _____ (please print name) to be the applicant in the submission of this application.

Furthermore, I/we, being the registered owner(s) of the subject lands, understand that should the application be approved an agreement will be entered into with the Town by ourselves, the registered owner(s) of the property.

Signature of Owner
Signature of Owner

Date
Date

DECLARATION OF APPLICANT

I, _____ of the _____ of _____ in the _____ of _____ solemnly declare that:

All the statements contained in this application and provided by me 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.

Furthermore, I, being the applicant of the subject lands, hereby authorize Town Council, staff and/or agents, to enter upon the property for the purpose of conducting a site inspection with respect to the attached application

Witness
Signature of Applicant

Witness
Signature of Applicant

Office Use Only:		Roll No: _____
Property Taxes in Good Standing: <input type="checkbox"/> Yes <input type="checkbox"/> No _____ (initial)	Water/Sewer in Good Standing: <input type="checkbox"/> Yes <input type="checkbox"/> No _____ (initial)	Other: _____
Outstanding Work Orders (Bldg Dept): <input type="checkbox"/> Yes <input type="checkbox"/> No _____ (initial)	Outstanding Work Orders (Fire Dept): <input type="checkbox"/> Yes <input type="checkbox"/> No _____ (initial)	Other: _____
_____	Application Complete: _____	_____
Date of Submission	Signature	Date

Questions??

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