

## DOWNTOWN RENEWAL GRANT

### CONTACT INFORMATION

APPLICANT		PROPERTY OWNER	
FULL NAME:		FULL NAME:	
STREET ADDRESS:		STREET ADDRESS:	
CITY:		CITY:	
POSTAL CODE:		POSTAL CODE:	
PHONE:		PHONE:	
EMAIL:		EMAIL:	
OWNER AUTHORIZATION SIGNATURE:			

### PROPERTY INFORMATION

BUSINESS NAME:		PID:	
STREET ADDRESS:		LEGAL DESCRIPTION:	
CITY:			
POSTAL CODE:			
NUMBER OF FLOORS:		CURRENT USE:	<input type="checkbox"/> RETAIL <input type="checkbox"/> OFFICE <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> RESTAURANT <input type="checkbox"/> MIXED USE <input type="checkbox"/> OTHER COMMERCIAL
TOTAL SQUARE FEET:			

### ELIGIBILITY

THE BUSINESS OPERATES IN A COMMERCIAL BUILDING LOCATED WITHIN THE DOWNTOWN BIA BOARDS	<input type="checkbox"/>
THE APPLICANT IS EITHER THE PROPERTY OWNER OR BUSINESS OWNER WITH PROPERTY OWNER'S WRITTEN CONSENT	<input type="checkbox"/>
THE PROJECT HAS NOT YET STARTED, ONLY PRE-APPROVED PROJECTS	<input type="checkbox"/>
NO MUNICIPAL CHARGES ARE IN ARREARS (PROPERTY TAXES, UTILITY FEES, BUSINESS LICENCE FEES)	<input type="checkbox"/>
NO OTHER SUCCESSFUL APPLICATION HAS BEEN APPROVED FOR THIS PROPERTY IN THE CURRENT YEAR	<input type="checkbox"/>

## PROJECT INFORMATION

WHICH STREAM ARE YOU APPLYING FOR?	<input type="checkbox"/> FAÇADE IMPROVEMENT <input type="checkbox"/> CPTED (Crime Prevention Through Environmental Design)		
BRIEF DESCRIPTION OF PROJECT:			
APPROXIMATE START DATE:		APPROXIMATE COMPLETION DATE:	
PLEASE ATTACH THE FOLLOWING:	<input type="checkbox"/> PHOTOS OF EXISTING CONDITION <input type="checkbox"/> TECHNICAL AND TO SCALE DRAWINGS OF PROPOSED WORK <input type="checkbox"/> DESCRIPTION OF MATERIALS, DESIGNS, AND COLOUR SAMPLES		

## PROPOSED BUDGET

Please provide a detailed description of your proposed project budget here. If you prefer, you may attach this separately to this application form.

MATERIALS/SERVICE DESCRIPTION	SUPPLIER/CONTRACTOR	COST (\$)
ESTIMATED PROJECT TOTAL:		
CITY GRANT REQUEST (50% OF COST UP TO \$10, 000):		

## APPLICATION CHECKLIST

REVIEWED FAÇADE AND/OR CPTED DESIGN GUIDELINES	<input type="checkbox"/>
PROVIDED WRITTEN PROPERTY OWNER AUTHORIZATION	<input type="checkbox"/>
CONFIRMED PROJECT ELIGIBILITY	<input type="checkbox"/>
PROVIDED A PROJECT DESCRIPTION AND TECHNICAL SKETCHES	<input type="checkbox"/>
PROVIDED A BUDGET WITH CONTRACT QUOTES	<input type="checkbox"/>
APPLIED FOR ANY REQUIRED PERMITS AND ATTACHED COPIES WITH YOUR APPLICATION	<input type="checkbox"/>
APPLICATION PACKAGE SUBMITTED TO THE CITY BY DECEMBER 31 <sup>st</sup>	<input type="checkbox"/>

## DECLARATION AND SIGNATURE

I understand that my submission of an application does not constitute a guarantee for funding under the Business Front Revitalization Grant Program. I certify that all information contained within this application is true and accurate to the best of my knowledge.

<b>SIGNATURE OF APPLICANT:</b>	<b>DATE:</b>
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This application form collects relevant details that will help assess the applicant's project and their eligibility for the grant and allow the City to evaluate the program.

### FOR INTERNAL USE ONLY:

The Long Range Planning department has checked the eligibility of the application and the application is accepted:

<b>SIGNATURE:</b>	<b>DATE:</b>
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The information collected in this application is used for the purpose of administering the Community Beautification Grant Program and to maintain communication as considered necessary. Please note that any information included as part of this application may form part of a Council report which is public in nature.

The City of Campbell River is collecting this personal information pursuant to s. 26 of the *Freedom of Information and Protection of Privacy Act*, for the following purpose:

26(c) - the information relates directly to and is necessary for a program or activity of the public body.

If you have any questions about this collection of personal information, please contact the City's Privacy Head at [foipppa@campbellriver.ca](mailto:foipppa@campbellriver.ca) or 250-286-5700.