



LAMBTON SHORES COMMUNITY IMPROVEMENT PLAN (CIP) APPLICATION FORM

Office Use Only	
File Number:	
Date Received:	
Date Complete:	

PART A: OWNER, APPLICANT, PROPERTY INFORMATION

Applicant Information:	
Applicant Name:	Bonnie Doone Hotel
Applicant Mailing Address:	16 Government Road Grand Bend
Applicant Telephone:	519-238-2236
Applicant Email:	
Applicant is:	<input type="checkbox"/> Registered Owner <input type="checkbox"/> Tenant <input checked="" type="checkbox"/> Authorized Agent
Owners Information (if different from above)	
Owner(s) Name:	Robert Newmaster
Full Mailing Address:	P.O. Box 550 Grand Bend Ontario N0M 1T0
Telephone:	519-238-2236
Email:	bdoone@hay.net
Primary Contact	<input checked="" type="checkbox"/> Authorized Agent <input type="checkbox"/> Registered Owner
Mortgage Information	
Name of Mortgage Holder	No Mortgage
Address of Mortgage Holder:	
Pre-Consultation	
Date of Pre-Consultation Meeting:	



Subject Property Information	
Municipal Address:	16 Government Road Grand bend Ontario N0M 1T0
Legal Description:	Con LRW Part Lot 1 Plan 4 Being RP25R3597
Roll Number:	3845520010427000000
Property Size (Area) (metric):	
Existing Official Plan Designation:	
Existing Zoning:	
Heritage Designation	Is the subject property:
	<input type="checkbox"/> Designated under Part IV of the Ontario Heritage Act
	<input type="checkbox"/> Designated under Part V of the Ontario Heritage Act
	<input type="checkbox"/> Listed in Appendix A of the Lambton Shores Official Plan
Description of property and present use(s):	

PART B: PROJECT INFORMATION

Please indicate the Financial Incentive Program for which you are applying (select all that apply):	<input checked="" type="checkbox"/> Façade Improvement Grant Program
	<input type="checkbox"/> Building Restoration, Renovation, or Improvement Grant Program
	<input type="checkbox"/> Accessibility Improvement Grant Program
	<input type="checkbox"/> Energy Efficiency and Retrofit Grant Program
	<input type="checkbox"/> Property Improvement Grant Program
	<input type="checkbox"/> Patio Grant Program
	<input type="checkbox"/> Commercial Area Housing Grant Program
	<input type="checkbox"/> Destination Infrastructure Grant Program
	<input type="checkbox"/> Development Charge Grant Program
	<input type="checkbox"/> Tax Increment-Equivalent Grant Program
<input type="checkbox"/> Environmental Site Assessment Grant Program	
Please describe the proposed construction project and how it represents an improvement for the property (attach	To Create new fencing along the edge of property on 16 Government Road, remove old bushes and replace with wrought iron fencing to improve the aesthetics of the property facing the lake.



THE MUNICIPALITY OF
LAMBTON SHORES

9577 Port Franks Road
Thedford, ON
N0N 2N0

www.lambtonshores.ca/

additional pages if needed):	
Approximate Construction Start Date:	May 1st 2024
Approximate Construction End Date:	May 5th 2024
Estimated Total Project Costs:	\$4500
Requested Funding (Cannot Exceed Program Limits):	



PART C: ACKNOWLEDGEMENT/AUTHORIZATION/DECLARATION

Agreement of Owner/Applicant:

The Owner/Applicant hereby agrees that the Municipality of Lambton Shores is not responsible for the costs associated with the preparation of this application, or in anticipation of receiving approval, or any other costs incurred in relation to any of the programs.

The Owner/Applicant hereby authorizes municipal staff, Council, and/or agents of the municipality (i.e. engineers) to enter the property for the purposes of performing inspections, without further notice, related to the processing of this application and fully indemnify the municipality for any and all claims or damages arising or resulting from such access.

The Owner/Applicant hereby provides consent, for the purpose of the *Municipal Freedom of Information and Protection of Privacy Act*, to the Municipality of Lambton Shores to use and disclose personal information to any person or public body that is collected under the authority of the *Planning Act* for the purposes of this application.

The Owner/Applicant hereby declare that I have read and understand the information set out in the eligibility requirements for the program(s) being applied in this application:

03/20/2024

Date

Signature of Owner/Applicant



Authorization of Owner for Applicant to make the application

I, Robert Newmaster am the owner of the land that is the subject of this application and I authorize Barb Carrington to make this application on my behalf, and to provide any of my personal information that will be included in this application or collected during the processing of the application under the *Municipal Freedom of Information and Protection of Privacy Act*.

03/20/2024

Date

Signature of Owner



Declaration

I, Barb Carrington of the Municipality\Town\ City of Grand Bend,
in the County\Region\District of Lambton Shores,

SOLEMNLY DECLARE THAT

All statements contained 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 and by virtue of the Canada Evidence Act.

Declared before me at the Municipality/Town/City of Grand Bend in the
County/Region/District of Lambton Shores this 20 day of

March 2024

Roberta Brandon, DEPUTY-CLERK
Municipality of Lambton Shores
County of Lambton
~~Commissioner, R.S.O Chapter G.17~~

A Commissioner of Oaths

B. Carrington

Signature of Owner/Applicant