APPENDIX A

Lambton Shores Community Improvement Plan (CIP) Application Form



LAMBTON SHORES COMMUNITY IMPROVEMENT PLAN (CIP) CHECKLIST FORM

The following information is required to be submitted as part of the CIP application:

☐ Pre-consultation Meeting

- Prior to completing the Community Improvement Plan Application form, the applicant is required to contact the Development and Planning Department at Lambton Shores to conduct a pre-consultation meeting. The meeting will discuss the proposed project and complete submission requirements.
- Please contact planning@lambtonshores.ca or (519) 243-1400 (press 4) to schedule a pre-consultation meeting.

☐ Complete Application Form

 Please complete and sign the attached application form and submit it to the Development and Planning Department at Lambton Shores.

☐ Submission of Quotes for the Proposed Improvement Work

• Please submit with the application at least two quotes showing an itemized breakdown of costs from qualified professionals for the proposed improvement.

☐ Photographs

- Please include digital photos of the current condition of the property/site/building which is the subject of the application(s).
- Please include any additional photos as that may have been required by municipal staff during the pre-consultation process, if applicable.

□ Drawings

- Please submit drawings of the proposed works which may include: site concept plan, elevations, floor plans, design details, etc.
- Please include any drawings as outlined by municipal staff during the preconsultation process, if applicable.

☐ Additional Information (if applicable)

 Please include any additional information as that may have been required by municipal staff during the pre-consultation process, including but not limited to: historical information and photos, tax assessment.



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All CIP Applications deemed complete by Municipal staff will be assigned a file number and this number should be used in all communications.

If additional supporting material or documentation is required, or becomes necessary during the processing of this application, the applicant will be contacted and informed of the additional required information.



LAMBTON SHORES COMMUNITY IMPROVEMENT PLAN (CIP) APPLICATION FORM

Office Use Only	
File Number:	
Date Received:	
Date Complete:	
PART A: OWNER, APPL	ICANT, PROPERTY INFORMATION
<u>.</u>	
Applicant Information:	
Applicant Name:	Click or tap here to enter text.
Applicant Mailing	Click or tap here to enter text.
Address:	
Applicant Telephone:	Click or tap here to enter text.
Applicant Email:	Click or tap here to enter text.
Applicant is:	☐Registered Owner
	□Tenant
	☐Authorized Agent
Owners Information (if	
Owner(s) Name:	Click or tap here to enter text.
Full Mailing Address:	Click or tap here to enter text.
Telephone:	Click or tap here to enter text.
Email:	Click or tap here to enter text.
Primary Contact	☐Authorized Agent
	☐Registered Owner
Mortgage Information	
Name of Mortgage	Click or tap here to enter text.
Holder	
Address of Mortgage	Click or tap here to enter text.
Holder:	
Pre-Consultation	
Date of Pre-	Click or tap here to enter text.
Consultation Meeting:	

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Subject Property Information						
Municipal Address:	Click or tap here to enter text.					
Legal Description:	Click or tap here to enter text.					
Roll Number:	Click or tap here to enter text.					
Property Size (Area)	Click or tap here to enter text.					
(metric):						
Existing Official Plan	Click or tap here to enter text.					
Designation:						
Existing Zoning:	Click or tap here to enter text.					
Heritage Designation	Is the subject property:					
	☐ Designated under Part IV of the Ontario Heritage Act					
	☐ Designated under Part V of the Ontario Heritage Act					
	☐ Listed in Appendix A of the Lambton Shores Official Plan					
Description of property	Click or tap here to enter text.					
and present use(s):						

PART B: PROJECT INFORMATION

Please indicate the	☐ Façade Improvement Grant Program	
Financial Incentive	☐ Building Restoration, Renovation, or Improvement Grant	
Program for which you are applying (select all that apply):	Program	
	☐ Accessibility Improvement Grant Program	
	☐ Energy Efficiency and Retrofit Grant Program	
	☐ Property Improvement Grant Program	
	☐ Patio Grant Program	
	☐ Commercial Area Housing Grant Program	
	☐ Destination Infrastructure Grant Program	
	☐ Development Charge Grant Program	
	☐ Tax Increment-Equivalent Grant Program	
	☐ Environmental Site Assessment Grant Program	
Please describe the	Click or tap here to enter text.	
proposed construction		
project and how it		
represents an		
improvement for the		
property (attach		



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additional pages if needed):	
Approximate Construction Start	Click or tap here to enter text.
Date: Approximate	Click or tap here to enter text.
Construction End Date:	
Estimated Total Project	Click or tap here to enter text.
Costs:	·
Requested Funding	Click or tap here to enter text.
(Cannot Exceed	·
Program Limits):	

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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:

Date	Signature of Owner/Applicant



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Authorization of Owner for Applicant to make the application

I,application and I authorize _	am the owner of the land that is the subject of this
will be included in this applicat	ehalf, and to provide any of my personal information that ion or collected during the processing of the application of Information and Protection of Privacy Act.
Date	Signature of Owner



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Declaration

l,	of the Municipality\T	own\ City of		,	
in the County\Region\Distr	ict of	,			
SOLEMNLY DECLARE TH	HAT				
All statements contained in	this application are true	Э			
And I make this solemn de that it is of the same force Evidence Act.					
Declared before me at the	Municipality/Town/City	of		_ in the	
County/Region/District of _		this	day of		
20					
A Commissioner of Oaths		Signatur	Signature of Owner/Applicant		