



# Community Improvement Plan: Application for Funding

**Introduction:** The Town of Carleton Place Community Improvement Plan (CIP) establishes a strategy for the rehabilitation and improvement of private lands. The CIP provides financial incentives for Façade Improvement in the Downtown District and the creation of affordable housing throughout Town.

**Pre-Consultation:** All applicants must have a meeting with the Town prior to submitting an application. The purpose of the meeting is to confirm property and project eligibility and program requirements.

**Authorization (page 5):** If the applicant is not the owner of the property, a written statement by the owner must accompany the application, which authorizes the applicant to act on behalf of the owner as it relates to the subject application.

**Plans & Drawing:** All applications for CIP incentive programs must include accurate, detailed copies of plans / drawings / renderings showing the proposed improvements for which the application is being made.

**Supporting Information:** Additional information may be required by the Town to evaluate the proposed application.

**Application Processing:** Upon receipt of an **application, drawings/plans and other required information**, the Town will review the application for completeness and eligibility and will issue an "Approvals" letter. Funds are released after work is completed and proof of costs has been submitted by the applicant.

Projects must be completed within one year of approval, but recipients may apply for a grant extension.

**Submissions:** Niki Dwyer  
Director of Development Services  
Town of Carleton Place  
175 Bridge Street  
Carleton Place, ON K7C 2V8  
Telephone: (613) 257-6202  
www.carletonplace.ca  
ndwyer@carletonplace.ca

**Copies:** One (1) copy of this application form

One (1) copy of all plans/drawings/  
renderings

One (1) copy of other information:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\*all copies may be provided digitally

**Town of Carleton Place  
Application for CIP Incentive Programs**

---

---

**APPLICANT INFORMATION**

1. a) Registered Owner(s): \_\_\_\_\_  
Address: \_\_\_\_\_
- b) Phone: Home \_\_\_\_\_ Work \_\_\_\_\_  
Fax \_\_\_\_\_ Email \_\_\_\_\_

If the application will be represented, prepared or submitted by someone other than the registered owner(s) please specify:

- c) Authorized Agent(s): \_\_\_\_\_  
Address: \_\_\_\_\_
- d) Phone: Home \_\_\_\_\_ Work \_\_\_\_\_  
Fax \_\_\_\_\_ Email \_\_\_\_\_

NOTE: Unless otherwise requested, all communication will be sent to the tenant/agent, if any.

**PROPERTY DESCRIPTION**

2. **MUNICIPAL ADDRESS:** \_\_\_\_\_  
**LEGAL DESCRIPTION:** \_\_\_\_\_

3. Date the subject land was acquired by the current owner: \_\_\_\_\_

4. Describe any easements, mortgages, charges, or other encumbrances in respect of the subject land:  
\_\_\_\_\_

5. **EXISTING USE OF LAND:** \_\_\_\_\_ **Date of Construction:** \_\_\_\_\_

6. **PROPOSED USE OF LAND:** \_\_\_\_\_

7. **ZONING:** \_\_\_\_\_ Is an amendment required for proposed work? **Yes** **No**

8. **TAXES AND OUTSTANDING WORK ORDERS:**

Current Assessed Value of Property: \_\_\_\_\_

Is current tax receipt attached? **Yes** **No**

Is the property in tax arrears? **Yes\*** **No**

Are there outstanding work orders on the property? **Yes\*** **No**

If "Yes", please describe: \_\_\_\_\_

*\* note that outstanding charges must be satisfactorily addressed prior to the application processing and grant and/or tax assistance payment*

**Town of Carleton Place  
Application for CIP Incentive Programs**

---

---

**PROPOSED IMPROVEMENTS**

**9. INCENTIVE PROGRAMS:**

Check off the incentive program(s) for which this application applies. Indicate grant amount requested.

	<b>Amount</b>
1. Affordable Housing DC Rebate (Program 3)	_____
2. Affordable Housing Building Permit Rebate (Program 4)	_____
3. Affordable Housing Accessory Residential Unit Program (Program 6)	_____
4. Front Façade Improvement Program (Program 12)	_____
5. Side/Rear Façade Improvement Program (Program 13)	_____
6. Façade Improvement and Accessibility Co-Application (Program 14)	_____
<b>TOTAL</b>	_____

**10. Description of proposed improvements (attach additional sheets if necessary):**

**11. Are copies of plans /drawings /renderings showing the proposed improvements attached?      Yes                      No**

**Town of Carleton Place  
Application for CIP Incentive  
Programs**

---

**12. BUILDING PERMIT INFORMATION:**

Will a building permit be required for the proposed improvements?	<b>Yes</b>	<b>No</b>
Building Permit/Application number: _____	Building Permit Fees Paid: _____	
Permit Application Date: _____	Value of Project (from permit): _____	

**13. ITEMIZED COST ESTIMATES:**

Are itemized cost estimates for the proposed improvements attached?*	<b>Yes</b>	<b>No</b>
--	------------	-----------

**14. CONSTRUCTION / PROJECT SCHEDULE:**

Estimated start of construction / improvement project:	_____
Estimated completion of construction / improvement project:	_____

\* Two (2) estimates for the cost of the work are required. Fundings will be granted based on the value of the lesser of the estimates.

**Town of Carleton Place  
Application for CIP Incentive  
Programs**

---

---

**AFFIDAVIT:**

I (we) \_\_\_\_\_ of the \_\_\_\_\_ (municipality),  
County of \_\_\_\_\_ solemnly declare that all the statements  
contained in this application are true, and I (we) make 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 Town of Carleton Place, Lanark County, this  
\_\_\_\_\_ day of \_\_\_\_\_, 20\_\_

\_\_\_\_\_  
**Signature of Owner**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**Signature of Commissioner**

\_\_\_\_\_  
**Date**

**AUTHORIZATION FOR TENANT / AGENT / SOLICITOR TO ACT FOR OWNER:**

*(If application and affidavit is signed by someone other than the Owner (i.e. tenant, agent, or solicitor), the Owner's written  
authorization below must be completed.)*

I (we) \_\_\_\_\_ of the \_\_\_\_\_ (municipality),  
District of \_\_\_\_\_ do hereby authorize \_\_\_\_\_ to make this  
application or act as my (our) agent in this application.

\_\_\_\_\_  
**Signature of Owner(s)**

\_\_\_\_\_  
**Date**

---

---

**APPLICATION RECEIVED BY THE MUNICIPALITY:**

\_\_\_\_\_  
**Signature of Employee**

\_\_\_\_\_  
**Date**