

BROWNFIELDS INCENTIVE PROGRAMS APPLICATION FORM



A. General Information and Instructions

1. Before filling out this application form, **please read the Program Guide(s)** that apply to the programs for which you are making application. Please ensure that you understand the general program requirements and the requirements for the specific program(s) for which you are making application.
2. Prior to submission of this application form, you must arrange for a pre-application meeting with staff to discuss and confirm program eligibility, application requirements including supporting documentation, proposed scope of work, cost, and project timing.
3. Please ensure that this application is complete, all required signatures have been provided, and all required supporting documentation has been submitted. Failure to do so may result in refusal by the Municipality to accept the application as complete or application processing delays.
4. If an agent is acting for the property owner, please ensure that the required authorization is completed and signed by the owner as provided in Section C of this application form.
5. If the property owner is a Corporation, the signing officer's name, title and corporation seal or indication that such person has the authority to bind the corporation, must be provided on the application.
6. If you find insufficient space on this form to respond to questions, please provide additional information on a separate page and attach to your completed application form.
7. Please attach to the application the required supporting documents as requested by City Staff. An application will not be considered complete until all required documents have been submitted.
8. Please print (black or blue ink) or type the information requested on the application form.
9. You may deliver your application in person or send it by mail to:
City of Welland
Planning and Development Services – Planning Division
60 East Main Street, Welland, Ontario, L3B 3X4
10. ***For further information on the Brownfield Incentive Programs, contact:***
Phone: (905) 735-1700, Extension 2251
Fax: (905) 735-8772
Email: cips@welland.ca

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--PLEASE PRINT--

Application No. _____
(Office Use Only)

**Section H is to be completed by the environmental consultant (Qualified Person).
All other sections are to be completed by the owner or the owner's agent.**

B. Owner Information

Name of Registered Property Owner			
Mailing Address of Property Owner			
Phone:		Fax:	
Email:			

C. Agent Authorization and Information

If the property owner is authorizing an agent to act on his/her behalf in making this application, please complete and sign this section. If an agent is authorized, all correspondence will be sent to the authorized agent. If no agent is authorized, all correspondence will be sent to the property owner.

I,		am the owner of the land that is subject of this application,					
and I hereby authorize my agent							
to make this application and to act on my behalf in regard to this application.							
Dated at the		, this		of		,	
	(City/Town of...)		Day		Month		Year
Name of Owner (please print)		Signature of Owner					

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Agent Information (if any)

Name of Agent			
Mailing Address of Agent			
Phone:		Fax:	
Email:			

D. Solicitor's Information (if applicable)

Name of Solicitor			
Mailing Address of Solicitor			
Phone:		Fax:	
Email:			

E. Property Information

Municipal Address(es) of Property for which this Application is being submitted	
Assessment Roll Number(s)	

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Legal Description of Property (Lot and Plan Numbers)

Existing Property Use					
Size of Property		hectares			
Existing Buildings on Property?		Yes	No	(If yes, specify building size below)	
Building 1			sq. ft.		
Building 2			sq. ft.		
Building 3			sq. ft.		

(Please list all additional buildings on a separate sheet)

Is property designated under Part IV or Part V of the Ontario Heritage Act?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Current property tax paid annually	\$			
Is this property in property tax arrears?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, specify the value of the property tax arrears	\$			
Are there any outstanding work orders on this property?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Have tax arrears been cancelled (in whole or in part) on this property under any City program?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>

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F. Other Sources of Government Funds

Have you applied for or been approved for any other sources of government funding? (includes City, Regional, Provincial, Federal, Canada Mortgage and Housing Corporation, Federation of Canadian Municipalities, etc...)

Yes No

If yes, please list other sources and amounts of government funding:

Program _____ \$

Program _____ \$

G. Application Type

Please place a check mark in the box below beside each incentive program for which you are applying. Then please complete the appropriate information section for each incentive program for which you are applying.

- Environmental Study Grant (ESG) Program (complete Section I);**
- Brownfields Tax Assistance (BTA) Program (complete Section J);**
- Brownfields Tax Increment Grant (BTIG) Program (complete Section J);**
- Brownfields Fees Grant (BFG) Program (complete Section K).**

H. Environmental Information (this section to be completed by a Qualified Person as defined by the Environmental Protection Act and Ontario Regulation 153/04)

Name and Title of Qualified Person (QP)			
Company Name			
Mailing Address			
Phone:		Fax:	
Email:			

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J. Brownfields Tax Assistance/Brownfields Tax Increment Grant Programs

Please attach at least two (2) cost estimates/work plans for the eligible cost items listed below. Please note that the approved grant amount will be based on the lesser of the two cost estimates, or the actual cost of the eligible works, whichever is less.

Note: *Estimates for cost items 1-6 above must be prepared by a qualified person.
Estimates for cost items 7-11 must be prepared by a bona fide contractor.*

Eligible Cost Item	Estimated Cost
1. Any costs of Phase II ESA's, Remedial Work Plans, Designated Substances and Hazardous Material Surveys and Risk Assessments/Risk Management Plans not covered by the ESG Program	\$
2. Environmental Remediation including the cost of preparing an RSC	\$
3. Placing, grading and compacting clean fill required to replace contaminated soils/ fill disposed of off-site	\$
4. Installing, monitoring, maintaining and operating environmental and/or engineering controls/works as specified in the Remedial Work Plan and/or Risk Assessment/ Risk Management Plan	\$
5. Monitoring, maintaining and operating environmental and engineering controls/ works as specified in the Remedial Work Plan and/or Risk Assessment	\$
6. Environmental Insurance Premiums	\$
Total Costs Eligible for BTA (Sum Costs 1-6 above)	\$
7. Removal/abatement of designated substances and hazardous materials	\$
8. Building demolition	\$
9. Building construction	\$
10. Building renovation and retrofit works	\$
11. Upgrading on-site infrastructure including water services, sanitary sewers and stormwater management facilities	\$
Total Eligible Costs Eligible for a BTIG (Sum Costs 1-11 above)	\$

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Estimated construction value of the proposed development	\$		
Estimated Post-Project Assessment Value of Land and Buildings (as prepared by a qualified property tax consultant)	\$		
Estimated Demolition Start and End Date (Month/Year)	Start Date	End Date	
Estimated Construction Start and End Date (Month/Year)	Start Date	End Date	

K. Brownfields Fees Grant

Eligible Fee Type	Fees Paid
Planning Application Fees	\$
Demolition Permit Fee	\$
Building Permit Fee	\$
Total Fees Paid	\$

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L. Sworn Declaration

I/WE HEREBY APPLY for the incentive programs as indicated in this application form.

I/WE HEREBY AGREE to abide by the terms and conditions of these incentive programs.

I/WE HEREBY AGREE to enter into an agreement(s) with the City that specifies the terms and conditions of these incentive programs and abide by the terms and conditions of said agreement(s).

I/WE HEREBY CERTIFY that the information contained in this application is true, correct and complete in every respect and may be verified by the City by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

I/WE HEREBY AGREE that if any statements or information in this application or submitted in support of this application are untrue, misleading or there is a material omission, the application may be rejected or not approved, or any tax assistance and/or grant may be delayed, reduced, cancelled or repayment of the property tax assistance and/or grant may be required.

I/WE HEREBY AGREE that the property tax assistance/grant may be delayed, reduced, cancelled or repayment of the tax assistance/grant may be required if the eligible works are not completed, not completed as approved, or if the contractors are not paid.

I/WE HEREBY AGREE that any eligible works carried out prior to written receipt from the City of tax assistance/grant approval are not eligible for the property tax assistance/grant.

I/WE HEREBY AGREE that the program(s) for which application has been made herein is/are subject to cancellation and/or change at any time by the City in its sole discretion, subject to the terms and conditions specified in the program. Participants in the program whose application has been approved and who have entered into a tax assistance/grant agreement with the Municipality will continue to receive tax assistance/grant payments, subject to meeting the terms and conditions in their tax assistance/grant agreement.

I/WE HEREBY AGREE that all property tax assistance/grants will be calculated and awarded in the sole discretion of the City. Notwithstanding any representation by or on behalf of the City, or any statement contained in the program, no right to any property tax assistance/grant arises until it has been duly authorized, subject to the applicant meeting the terms and conditions of the programs and corresponding agreements. The City is not responsible for any costs incurred by the Owner/Applicant in any way relating to the program, including, without limitation, costs incurred in anticipation of property tax assistance/a grant.

Dated at the _____, this _____ of _____,			
(City/Town of...)	Day	Month	Year
_____ Name of Owner or Authorized Agent (please print)		_____ Signature of Owner or Authorized Agent	

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M. Affidavit

I/We, _____ of the City of _____
in the Regional Municipality of _____
make oath and say (or solemnly declare) that the information contained in this application is true and that the
information contained in the documents that accompany this application in respect of the application is true.
Sworn (or declared before me) at the _____
in the _____ this _____ day of _____ 20__.

Commissioner of Oaths

Applicant

Note: Information provided in this application will become part of a public record.