



**CITY OF WELLAND**

**AFFORDABLE RENTAL HOUSING COMMUNITY  
IMPROVEMENT PLAN (CIP)**

**APPLICATION FORM**

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## **PROGRAM DESCRIPTION AND BACKGROUND INFORMATION**

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*Please Note: This application form is to be used by persons wishing to apply for funding through the Affordable Rental Housing Community Improvement Plan (CIP) and is to be filled out by the owner or an agent authorized by the owner.*

The purpose of the Affordable Housing CIP Program is to increase the supply of affordable rental housing throughout the Urban Area, to support the building of complete communities and cost-efficient development patterns, to encourage a continuum of affordable rental housing options, including a diversity of housing units by size and number of bedrooms, and, to promote the construction of affordable additional dwelling units.

The Affordable Housing CIP offers (5) grant programs The Director of Planning and Development Services has the authority to approve these programs.

### Grant Programs

- Tax Increment Grant Program (TIG)
- Affordable Housing Study Grant (AHG)
- Affordable Residential Forgivable Loan (ARFL)
- Extended Benefit Grant (EBG)
- Municipal Fees Grant (MFG)

Before filling out this form, please read the attached Affordable Rental Housing CIP and arrange for a pre-consultation meeting with City Staff. Please ensure you understand the requirements of the program for which you are applying.

If you find insufficient space on this form to respond to the questions, please provide additional information on a separate page and attach it to the completed form.

Please PRINT the information required on this form, and submit it online to [devserv@welland.ca](mailto:devserv@welland.ca), or in person at the Planning & Building counter at City Hall.

## AFFORDABLE RENTAL HOUSING COMMUNITY IMPROVEMENT PLAN APPLICATION FORM

### CHECKLIST FOR CONSIDERATION

*Before completing and submitting this application, please refer to the following checklist to confirm that you are eligible to apply for Gateway CIP incentives.*

- My property is within the Urban Boundary  
*(See the Affordable Rental Housing CIP for a map outlining the approved CIP Project Areas)*
- I have not yet commenced any works to which this funding would apply
- The appropriate planning approvals have been received
- I have included the necessary documents required by the Local Municipality (see #\_\_\_\_\_ on this form for the list of required documents)
- The proposed land use for the property is in conformity with the Regional Official Plan (ROP) and applicable Local Official Plans (OPs), Zoning By-Laws and other planning requirements and approvals at the Local and Regional levels

**AFFORDABLE RENTAL HOUSING COMMUNITY IMPROVEMENT PLAN APPLICATION FORM**

**APPLICATION**

OFFICE USE ONLY			
<b>1. Date of Submission:</b>	Day	Month	Year

**2. APPLICANT INFORMATION**

**a. Registered Owner** *(if a numbered company, also give name and address of principal owner)*

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Non-Profit Organization: YES  NO

**b. Agent** (All correspondence will be sent to the applicant, unless otherwise directed)

Name: \_\_\_\_\_

Address: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Telephone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

E-mail: \_\_\_\_\_

Please circulate both the registered owner AND the agent on all correspondence

**c. Agent Authorization**

I/we appoint and empower the agent listed above to act on my/ our behalf with respect to this application.

Signature of Owner: \_\_\_\_\_

Applicant Name/Organization: \_\_\_\_\_

### 3. DESCRIPTION OF THE PROPERTY

**a. Municipal Address**

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**b. Legal description** *(lot number, registered plan number, concession, reference plan, etc.)*

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**c. Assessment Roll Number (ARN)**

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**d. Current zoning designation**

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### 4. RELATED APPLICATIONS

- a) Have you attended a Pre-consultation meeting with Planning staff to discuss the proposal and confirm submission requirements?

Yes  No

- b) Are there existing, or have there been previous applications to receive incentives on the subject lands?

Yes  No

If the answer is yes, please specify the type and amount of funding applied for, and the status of that application (if known).

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- c) Are any applications under the Planning Act expected to be required as part of the proposed project (i.e. Zoning By-law Amendment, Official Plan Amendment, Minor Variance, Consent, Site Plan Application)?

Yes  No

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If **yes**, please indicate the type and status of any related planning application(s):

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**5. DESCRIPTION OF THE PROJECT**

a. Size of property \_\_\_\_\_

b. Existing property use \_\_\_\_\_

c. Number of existing buildings on property \_\_\_\_\_

d. Size of existing buildings on property \_\_\_\_\_

e. Project description *(In the space below, please provide a description of the project)*

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f. Please fill in the table below with detailed information on the housing units to be constructed.

i. Total number of dwelling units being created \_\_\_\_\_

ii. Total number of affordable rental units being created \_\_\_\_\_

# of Units	Unit Types Bachelor 1-Bedroom 2-Bedroom 3-Bedroom 4-Bedroom +	Unit Size (m2)	Household Tenure (Rental/ Ownership)	Dwelling Type Apartment Rowhouse Detached Accessory Dwelling Etc.	Unit Rent Per Month (\$)

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**g. Organization description** *(if applicable, in the space below, please provide a brief description of your organization.)*

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**h. Will the project receive charitable status?**

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## 6. PROJECT INVESTMENT

Please indicate the following:

- a. The estimated construction value of the project \_\_\_\_\_
- b. The expected START date of the project \_\_\_\_\_
- c. The expected END date of the project \_\_\_\_\_
- d. The current assessed value of the property \_\_\_\_\_
- e. The current property taxes \_\_\_\_\_

## 7. APPLICATION TYPE

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

- Tax Increment Grant Program *(complete subsection a.)*
- Affordable Housing Study Grant *(complete subsection b.)*
- Affordable Residential Forgivable Loan *(complete subsection c.)*
- Extended Benefit Grant *(complete subsection d.)*
- Municipal Fees Grant *(complete subsection e.)*

**AFFORDABLE RENTAL HOUSING COMMUNITY IMPROVEMENT PLAN APPLICATION FORM**

**a. TAX INCREMENT GRANT PROGRAM**

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.

**(i) Type of Improvement/Construction** **Cost Estimate (\$)**

Eligible Works (excluding HST) - insert lowest cost estimate	\$
Other sources of government funding? (includes Federal, Provincial, Municipal, Municipal Heritage Committee, CMHC, FCM, etc...)	\$
Total Eligible Costs	\$

**(ii) Construction Schedule**

Approximate Start Date of Construction (Month/Year): \_\_\_\_\_

Approximate End Date of Construction (Month/Year): \_\_\_\_\_

**b. AFFORDABLE HOUSING STUDY GRANT**

Name of Author or Qualified Professional Conducting the Study	
Company Name	
Mailing Address	
Phone:	Fax:
Email:	

**(i) Please describe the affordable housing study to be prepared.**

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**AFFORDABLE RENTAL HOUSING COMMUNITY IMPROVEMENT PLAN APPLICATION FORM**

**(ii) Cost Summary – Eligible Affordable Housing Study Grant (please attach one (1) cost estimate from a qualified professional for the affordable housing study to be prepared).**

Type of Improvement/Construction	Cost Estimate (\$)
a. Eligible Study Costs (excluding HST) - insert lowest cost estimate	\$
b. Other sources of government funding? (Includes Federal, Provincial, Municipal, Municipal Heritage Committee, CMHC, FCM, etc...)	\$
c. Total Eligible Costs (a-b)	\$
d. Amount of Grant Applied For: (0.5*cost item c above) to permitted maximum identified in Program Guide	\$

**(iii) Approximate completion date of the Affordable Housing Study (Month/Year):**

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**c. AFFORDABLE RESIDENTIAL HOUSING FORGIVABLE LOAN**

**(i). Provide how many affordable rental units are being created (max of 2)**

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**(ii) Cost Summary – Eligible Residential Construction Works (please attach two (2) detailed cost estimates from bona fide contractors for work to be performed).**

Type of Improvement/Construction	Cost Estimate (\$)
a. Eligible Works Costs (excluding HST) - insert lowest cost estimate	\$
b. Other sources of government funding? (Includes Federal, Provincial, Municipal, Municipal Heritage Committee, CMHC, FCM, etc...)	\$
c. Total Eligible Costs (a-b)	\$
d. Amount of Grant Applied For: (0.7*cost item c above) to permitted maximum identified in the CIP.	\$

**(iii) Construction Schedule**

Approximate Start Date of Construction (Month/Year): \_\_\_\_\_

Approximate End Date of Construction (Month/Year): \_\_\_\_\_

**d. EXTENDED BENEFIT GRANT**

The EBG program aims to support the provision of rents as deeply as 20% of AMR through to 60% of AMR.

**(i). Have you previously been approved, and met the requirements of all the Tax Increment Grant (TIG) Program and/or Affordable Residential Forgivable Loan (ARFL) Program?**

Yes  No

**(ii). Please identify the eligible dwelling units and applicable rents.**

<b>Unit</b>	<b>Unit Types</b> Bachelor 1-Bedroom 2-Bedroom 3-Bedroom 4-Bedroom +	<b>Unit Size</b> (m2)	<b>Dwelling Type</b> Apartment Rowhouse Detached Accessory Dwelling Etc.	<b>Unit Rent Per Month (\$)</b> <b>*must be between 60% and 20% of AMR</b>
<b>1</b>				
<b>2</b>				
<b>3</b>				
<b>4</b>				
<b>5</b>				
<b>6</b>				
<b>7</b>				
<b>8</b>				
<b>9</b>				
<b>10</b>				

**e. MUNICIPAL FEES GRANT**

**(i). Have you previously been approved, and met the requirements of all the Tax Increment Grant (TIG) Program and/or Affordable Residential Forgivable Loan (ARFL) Program?**

Yes  No

**(ii). Please indicate the municipal fees associated with your project.**

<b>Eligible Fee Type</b>	<b>Fees Paid</b>
i) Official Plan Amendment	\$
ii) Zoning By-law Amendment	\$
iii) Minor Variance	\$

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iv) Consent to Sever	\$
v) Site Plan Control and Development Agreements	\$
vi) Plan of Subdivision/Condominium	\$
vii) Demolition Permit	\$
viii) Building Permit	\$
ix) Other	\$
<b>TOTAL</b>	\$

**8. REQUIRED SUPPORTING DOCUMENTATION**

Please place a check in the box to ensure that you have included the required supporting documentation.

- photographs of the existing building & property
- historical photographs and/or drawings
- a site plan and/or professional architectural drawings
- Reports/Studies of the property (if applicable)

**9. OUTSTANDING ITEMS**

**Are there any outstanding work orders on this property? If yes, please identify the nature of the work orders.** *(Please attach copies of existing work orders or enforcement notices to this application, if applicable)*

	No	Yes
<b>Fire Code</b>		
<b>Building Code</b>		
<b>Property Standards</b>		
<b>Zoning By-Law Infractions</b>		
<b>Other Municipal By-Law Infraction</b>		

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**10. 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 GRANT permission to the City, or its agents, to inspect my/our property that is subject of this application.

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 payment of the incentive may be delayed, reduced or cancelled.

I/WE HEREBY AGREE that payment of an incentive may be delayed, reduced or cancelled if the work is not completed, not completed as approved, or if the contractors are not paid.

I/WE HEREBY AGREE that the incentive programs for which application has been made herein 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 programs whose applications have been approved and who have entered into an agreement(s) with the City, will continue to receive incentive program payments, subject to meeting the conditions in their agreement(s).

I/WE HEREBY AGREE that all incentive program payments 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 incentive program, no right to any incentive arises until it has been duly authorized, subject to the applicant meeting the terms and conditions of the program and the corresponding agreement(s). 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 a grant or a development charge reduction.

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