

New Retail & Commercial Business Interior

Development Incentive Program Application Form

Edmonton

Date of application: _____

Note: This application form does not constitute a complete application package. Please see the *New Retail and Commercial Business Interior Improvement Program Guide* or contact the Program Manager for the full list of materials required. Incomplete applications will not be considered.

| APPLICANT INFORMATION | | | |
|--|--|--|--------------|
| Applicant Name: | | | |
| Mailing address: | | | Postal Code: |
| Telephone Number: | | | |
| Email address: | | | |
| <i>The applicant is the:</i> | Property Owner <input type="checkbox"/> | Agent of the Property Owner <input type="checkbox"/> | |
| Property owner: | | | |
| Mailing address: | | | |
| Telephone number: | | | |
| Email address: | | | |
| PROJECT ADDRESS | | | |
| Street address: | | | |
| Property legal description: | | | |
| Property assessment account number: | | | |
| Existing Zoning designation: | | | |
| PROJECT BUILDING INFORMATION | | | |
| Number of vacant storefront(s): | | | |
| Is the building a Heritage building? | Yes <input type="checkbox"/> No <input type="checkbox"/> | | |
| How long has the storefront(s) been vacant? | | | |

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FUTURE COMMERCIAL TENANT INFORMATION (If applicable)

| | | | | |
|---|----------------------|--|---------------------|--|
| 1 | Tenant name: | | Business license #: | |
| | Contact person: | | * Type of Business: | |
| | Contact information: | | | |

* Designated eligible use: General Retail, Convenience Retail, Restaurant, Specialty Food Service, Personal Service, Other (please specify)

ADDITIONAL REQUIREMENTS

This application must adhere to the criteria and guidelines as laid out in the *New Retail and Commercial Business Interior Improvement Program Guide*.

Refer to the Grant Application Checklist in the program guide for a detailed list of supporting documents required for all applications.

Incomplete application packages will not be reviewed.

APPLICANT DECLARATION

I understand that my submission of an application package **does not** guarantee funding under the New Retail and Commercial Business Interior Improvement Program. I further certify that:

1. I have read and understand the Eligibility Criteria set out in the *New Retail and Commercial Business Interior Improvement Program Guide*;
2. All information in this application and supporting documents is true and complete to the best of my knowledge;
3. If funding is approved, work will be completed in accordance with the terms and conditions of the Reimbursement Agreement entered into with the City.

Applicant Signature

Date

Name (please print)

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AUTHORIZATION FOR AGENT OF THE PROPERTY OWNER (complete only if applicant is not the registered Property Owner)

I/We, _____ the owner of the subject property
hereby authorize _____ to act on my behalf with respect
to the application.

Signature of Property Owner

Date

Please note that the Property Owner's signature is always required on a Reimbursement Agreement. A separate letter of authorization will be required to issue a reimbursement cheque to an applicant who is not the legal property owner.

Your name, contact information, and project information is collected in accordance with 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. This information will be used to administer the Development Incentive Program. If you have any questions about the collection and use of your personal information, contact the Development Incentive Program Manager at 780-496-6196, 9th Floor 10111 104 Ave, Edmonton Alberta T5J 0J4. Please note that the name and location of buildings, building details, building designs, grant amounts, and total costs of projects may be released to various organizations, the media and the public in connection with the Development Incentive Program.

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Statutory Declaration

CANADA
Province of Alberta
To Wit

) in the matter of applying for the
) Development Incentive Program
)

I, _____, of City of Edmonton, in the Province of Alberta,

do solemnly declare that:

The building with the municipal address _____ has had a ground floor vacant commercial use storefront(s) for at least 6 months immediately prior to application to the program.

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
City of Edmonton,
in the Province of Alberta
this ____ day of _____,
20__

Print or Stamp Name of Commissioner

(Expiry Date of Commission or Office)

(Signature of Declarant)