



Hamilton

Planning and Economic Development Department
Commercial Districts and Small Business Section
71 Main Street West, 7th Floor
Hamilton, Ontario L8P 4Y5
Phone: (905) 546-2424 Ext. 2755
Fax: (905) 546-2693

\$570.65 Application Fee to Accompany Application

OFFICE TENANCY ASSISTANCE PROGRAM - APPLICATION FORM
(PLEASE ENSURE ALL DOCUMENTS/INFORMATION OUTLINED ON PAGE 4 OF THIS DOCUMENT ACCOMPANIES YOUR COMPLETED APPLICATION)

APPLICANT/BUILDING OWNER INFORMATION (if applicant is other than Owner, Letter of Authorization from the Owner must be attached)

Name:			
Contact Name:			
Address:			
Telephone:		Fax:	
Cell Phone:			
Email:			
If Corporation or Partnership date of Incorporation/Registration of Business:			
Names of Registered Shareholders/ Partners (Include Percentages of Ownership):			
Are you or any of the Directors/Shareholders in litigation with the City of Hamilton?			
Current Institutional Bank or Banks: (including address)			
Solicitor's Name:			
Address:			
Telephone:		Fax:	
Email:			

PROPERTY INFORMATION	
Address:	
Tax Roll Number: (if known)	
Current Use of Property (including number of units and dedicated parking spaces):	

TENANT INFORMATION (UNLESS TENANT IS APPLICANT)	
Name:	
Contact Name:	
Address:	
Telephone:	Fax:
Cell Phone:	
Nature of Business:	
Current location of business:	
Proposed Term of Lease:	
Is the office use going to create new jobs in the City of Hamilton? If yes, how many part-time and full-time positions will be created?	
Anticipated Occupancy Date:	

DECLARATION

I/We hereby grant permission to the City of Hamilton, to carry out the necessary inquiries for the purpose of determining my/our income, assets, liabilities and credit information, including checking my/our credit report with a Credit Bureau.

Date

Signature

Date of Birth:

Date

Signature

Date of Birth:

The personal information on this form is collected under the legal authority of the Planning Act, Section 28. The personal information will be used for determining your eligibility for a loan. If you have any questions about the collection, please contact the Co-ordinator of Urban Renewal Incentives, Commercial Districts and Small Business Section, City of Hamilton Planning and Economic Development Department, 71 Main Street West, 7th Floor, Hamilton, Ontario L8P 4Y5, 905-546-2424 x2755.

CRIMINAL OFFENCE:

Have you been convicted of any criminal offence for which you have not been granted a record suspension or pardon? Yes No

For applicants that are Corporations, this question must be answered for all principals of the Corporation.

Please note that if the answer is “**yes**”, submission of a criminal conviction record check may be required.

**SIGNATURE OF OWNER/AUTHORIZED AGENT CERTIFICATION DATE OF
APPLICATION SUBMISSION AND PERMISSION TO UTILIZE
PHOTOGRAPHS OF THE PROPERTY IN THE CITY OF HAMILTON'S
PROMOTIONAL MATERIAL**

I, _____, certify that answers and information I have provided in this application are true and complete, including my answer to the question of whether or not I (or the principal(s) of the Corporation) have been convicted of any criminal offence for which a record suspension or pardon has not been granted.

I also give permission to the City of Hamilton to utilize photographs of the property in the City of Hamilton's promotional material.

DOCUMENTS REQUIRED WITH APPLICATION

- ✓ Completed Application
- ✓ Incorporation Documents and list of Officers/Directors/Shareholders
- ✓ Partnership Documents and list of partners
- ✓ Accountant Prepared Financial Statements (most recent 2 years and current year to date)
- ✓ Net Worth Statement (identifying assets that have been pledged for security)
- ✓ Pro-forma and cash-flow for the term of the loan
- ✓ Copy of Lease (required when executed)
- ✓ Draft Lease (if available)
- ✓ Signed Declaration (page 5)

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CONSENT OF THE OWNER

Complete the consent of the owner concerning personal information set out below.

CONSENT OF THE OWNER TO THE USE AND DISCLOSURE OF PERSONAL INFORMATION

I, _____, am the owner of the land that is the subject of this application and for the purposes of the Municipal Freedom of Information and Protection of Privacy Act authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected under the authority of the Planning Act for the purposes of processing this application. I also give permission to the City of Hamilton to utilize photographs of the project/property in their promotional material.

Name of Owner (please print)

Signature of Owner

Date

Owner's Information:

Mailing Address:

City:

Postal Code:

Telephone (H):

Telephone (B):

Cell Phone:

Fax:

Email:

If Corporation or Partnership, Name of Registered Shareholders/ Partners and percentages of ownership

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