



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

**\$115.00 Application Fee for Grants less than or equal to \$5,000**  
**\$305.00 Application Fee for Grants less than or equal to \$10,000 & greater than \$5,000**

**COMMERCIAL VACANCY ASSISTANCE PROGRAM**

**APPLICANT INFORMATION (MUST BE TENANT OF PROPERTY)**

|   |  |
|---|--|
| Name of Applicant<br>(Individual or Corporation<br>or Partnership):   |  |
| Contact Name:   |  |
| Mailing Address:  |  |
| City & Postal Code:   |  |
| Telephone Number:   |  |
| Cell Phone Number:  |  |
| Email:  |  |
| If Corporation or<br>Partnership, include<br>Articles of Incorporation or<br>Partnership Agreement (if<br>applicable) and current<br>Officers/Directors |  |
| Name of Registered<br>Shareholders/Partners<br>(Shareholder Registry)   |  |

**PROPERTY OWNER INFORMATION**

|   |  |
|---|--|
| Name of Owner:  |  |
| Contact Name:   |  |
| Mailing Address:  |  |
| City & Postal Code:   |  |
| Telephone Number:   |  |
| Cell Phone Number:  |  |
| Email:  |  |
| If Corporation or<br>Partnership, include<br>Articles of Incorporation or<br>Partnership Agreement (if<br>applicable) and current<br>Officers/Directors |  |
| Name of Registered<br>Shareholders/Partners<br>(include Shareholder<br>Registry))   |  |

## THE PROPERTY

|                   |  |
|-------------------|--|
| Property Address: |  |
| Name of Business: |  |
|                   |  |

## WORK ESTIMATES

**Please attach two (2) independent contractor estimates for each component of the proposed improvement. Estimates are to be dated. Grant to be awarded based upon the lowest bid.**

|  |              |
|--|--------------|
| Preferred Contractor:                            |              |
| Building Repair Contractor Trade Licence Number: | Expiry Date: |
| Estimated Cost:                                  |              |
| Second Contractor:                               |              |
| Building Repair Contractor Trade Licence Number: | Expiry Date: |
| Estimated Cost:                                  |              |
| Total Construction Cost:                         |              |
| Total Grant Requested:                           |              |

**\*Note if an applicant wishes to change contractors following Grant application submission the applicant must first notify the Commercial Districts and Small Business Section and submit the required estimates to request approval for the change prior to the commencement of work.**

## DESCRIPTION OF IMPROVEMENTS

**Please provide a written description of the proposed improvements. Attach at least one (1) copy of architectural or design plan prepared by a professional (if available) or prepare a sketch showing proposed improvements.**

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How many square meters of commercial space will be constructed /renovated as a result of this application?

Duration of lease between tenant and property owner:

Is the business intended to be a “pop-up” or permanent business?

Is the commercial space subject to the application currently vacant?

Does the commercial space subject to the application have street facing access to the public and is located either at or below grade?

What is the planned commercial use (retail, restaurant, artist studio with commercial component, other)?  
Please provide a brief description of your business.

**OTHER INFORMATION (TO BE COMPLETED BY ALL APPLICANTS)**

Addresses of other properties in the City of Hamilton Boundary owned by the Applicant. If the application is from a Partnership or Corporation include addresses of properties owned by the Partnership or Corporation.

**Note: This information is being collected to determine if there are any outstanding taxes owed to the City of Hamilton.**

| Applicant/Partnership/<br>Corporation Name | Street Number and Name | Area of City (i.e. Hamilton,<br>Ancaster, Stoney Creek,<br>Waterdown, Dundas, Binbrook) |
|--|------------------------|---|
|  |                        |   |
|  |                        |   |
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|  |                        |   |
|  |                        |   |
|  |                        |   |

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

I, \_\_\_\_\_, solemnly declare that the information contained in this application is true, and that the information contained in the documents that accompany this application is true. I also give permission to the City of Hamilton to utilize photographs of the property in the City of Hamilton's promotional material.

\_\_\_\_\_  
**Applicant's Signature**

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

**Authorization:**

A separate written authorization of the property owner that the applicant is authorized to make the application must be included with this application.

**CONSENT OF THE PROPERTY OWNER**

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

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

I, \_\_\_\_\_, am the owner of the land that is the subject of this application and I hereby authorize, and consent to, the use by, and the disclosure to, any person or public body of any information, including personal information that is collected for the purposes of processing this application. I also give permission to the City of Hamilton to utilize photographs of the property in their promotional material.

\_\_\_\_\_  
**Name of Property Owner (please print)**

\_\_\_\_\_  
**Signature of Property Owner (with appropriate signing authority)**

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

|  |                       |
|--|-----------------------|
| <b>Property Owner's Contact Information:</b> |                       |
| Mailing Address:                             |                       |
|  |                       |
| City:  |                       |
|  |                       |
| Postal Code:                                 |                       |
| Telephone (Home):                            | Telephone (Business): |
| Cell Phone:                                  | Email Address:        |

## DOCUMENTS/INFORMATION REQUIRED WITH APPLICATION

- \_\_\_ Completed Application Form
- \_\_\_ Payment of Application Fee
- \_\_\_ Two (2) dated estimates for each of the permanent works being proposed for funding
- \_\_\_ Copy of a draft lease agreement for the commercial space/building that is the subject of a Program application
- \_\_\_ If the tenant of the property is the applicant, written authorization of the Property Owner that the applicant is authorized to make the application must be included with this application
- \_\_\_ Articles of Incorporation Documents (if applicable)
- \_\_\_ Articles of Amendment (if applicable)
- \_\_\_ Partnership Agreement Documents (if applicable)
- \_\_\_ Shareholders Registry (i.e. List of Shareholders and their respective percentage ownership) (if applicable)
- \_\_\_ List of Applicant's Officers and Directors (if applicable)
- \_\_\_ Anticipated start date for construction as well as anticipated completion date
- \_\_\_ Photos demonstrating state of property prior to construction/renovation taking place. Hard copies of photos are to be date stamped.

**Please note** the above information/documentation form part of a completed application (unless deemed to be non-applicable by the City). The City reserves the right to reject any incomplete application.

### PLEASE RETAIN FOR YOUR RECORDS

The information on this form is collected under the legal authorities provided in the *Municipal Act, 2001*, the *Municipal Freedom of Information and Protection of Privacy Act* and the *Planning Act* and will be used primarily to determine grant eligibility. If you have any questions about the collection of this information, 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.