



Additional Residential Unit Community Improvement Plan Application Form

Development Planning Section
Community Development Department
50 Dickson Street, 3rd Floor, P.O. Box 669
Cambridge, Ontario N1R 5W8
Tel: (519) 623-1340
TTY: (519) 623-6691

City use only

Date received:	Date accepted:	Grant amount issued:	File No.
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1.0 General Property Information

House Number: _____ Street Name: _____

City: **Cambridge, ON** Postal Code: _____

Note: A Parcel Register is required to be submitted with the application. Please visit ONland.ca to buy the parcel register for the above noted property.

Is the property designated or listed under the Ontario Heritage Act? Yes No

1.1 Registered Owner Mailing Information*

Name: _____

Street Name and Number: _____

City: _____ Postal Code: _____

Phone: _____ Ext. _____

Email: (required): _____

*If a numbered company, also give the name and address of the principal owner. If more than one owner, complete an additional page for each owner.

This application form must be completed by the owner. If more than one person owns the subject lands, the authorization of all owners is required. It is the responsibility of the owner(s) to advise the City of Cambridge of any changes in ownership, agents, their names, addresses and telephone numbers etc. (during the application review

process) to ensure that you are advised of all matters pertaining to this application.

2.0 Applicable Expenses

Please list the total cost of construction and development of the additional residential unit(s) on the property: _____

Note: Invoice(s) and/or Receipt(s) for the expenses list below must be submitted with the application.

How many Additional Residential Units did you construct? _____

Please indicate what types of expenses are being submitted and what amount:

Upgrading of sanitary building sewer and/or water service pipe	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate the amount:	
Professionally prepared permit drawings	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate the amount:	
Hard Construction Costs	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate the amount:	
Labour Costs	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please indicate the amount:	

Note: The total amount of financial incentives per property in the form of grants shall not exceed ten thousand dollars (\$10,000).

3.0 Eligibility Criteria Acknowledgement

Please confirm the following statements to the best of your knowledge:

There are no outstanding taxes on the property.	Yes <input type="checkbox"/>
A building permit was applied for in advance of construction, occupancy was granted and the permit has been closed.	Yes <input type="checkbox"/>
The building permit was applied for after September 1, 2024	Yes <input type="checkbox"/>
There are no outstanding charges or orders issued by the City of Cambridge for the property.	Yes <input type="checkbox"/>
There are no construction liens on the property.	Yes <input type="checkbox"/>

Sworn Declarations:

I/WE HEREBY APPLY for a grant under this program.

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 of Cambridge by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

I/WE HEREBY AGREE that the grant will be calculated and awarded at the sole discretion of the City of Cambridge. Notwithstanding any representation by or on behalf of City of Cambridge, or any statement contained in the program(s), no right to any grant arises until it has been duly authorized, subject to the applicant meeting the terms and conditions of the Community Improvement Plan. The City of Cambridge is not responsible for any costs incurred by the Owner/Applicant in any way relating to the program(s), including, without limitation, costs incurred in anticipation of a grant.

I/WE HEREBY AGREE that information regarding the grant amount issued, the nature of the project and photographs thereof, the total investment of the project, and the address of the property to which the grants are associated shall be disclosed as public information and may be included in promotional material and/or in a media release. Applicants shall be required to allow this information to be released to the public and to participate in public reviews of the program in future.

I/WE HEREBY AGREE that the City of Cambridge may reproduce, in whole or in part, any document submitted as part of an application for internal use, inclusion in staff reports or distribution to the public either online or through other means (such as email) for the purpose of application review.

Signature of Applicant

Date

Personal information on this form is collected under the authority of the *Planning Act, R.S.O. 1990, c. P.13* 1990 and will be used to review applications for financial incentives distributed as part of a Community Improvement Plan. Questions about this collection should be directed to the Planning Department by calling (519) 623-1340 or by emailing planning@cambridge.ca.