



Town of Minto
 5941 Hwy 89
 Harriston, ON NOG 1Z0
 Phone: 519-338-2511
 Fax: 519-338-2005

COMMUNITY IMPROVEMENT GRANT PROGRAM
Storefront Accessory Grant
(Benches, Bike Racks and Planters)
APPLICATION FORM

The purpose of this program is to encourage an enhanced curb appeal of privately owned commercial buildings in the Community Improvement Areas within the Town of Minto. Grant assistance is provided in the form of a 50/50 matching grant, which is paid upon completion of the previously approved work. ***This program offers a matching grant for eligible work to a maximum limit of \$500 per property.*** This program includes one or more of the following elements but is capped at \$500. One application per property, per year is permitted and available on a first come, first serve basis as funds permit.

(Please check all elements that apply to this application)

- Bench
- Planter
- Bike Rack

Application Number (assigned by staff):	
Date Application Received:	

PROPERTY INFORMATION

Municipal Address	Street Num:	Street Name:	Unit Num:
Commercial Name (if applicable)			
Registered Plan Number:		Registered Plan Lot/Block No.	

OWNER and APPLICANT INFORMATION

Property Owner Information (check one)	Person(s)	Company
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Registered Land Owner:	Surname:	First name:	
Name:	(if Company)	Company Officer	
Address:	Street No.	Street Name:	Unit Num:
Municipality:	Province:	Postal Code:	
Telephone:	No: ()	Fax: ()	Email:

Applicant Information (if different than Owner):

Application Contact:	Surname:	First name:	
Name:	(if Company)	Company Officer	
Address:	Street No.	Street Name:	Unit Num:
Municipality:	Province:	Postal Code:	
Telephone:	No: ()	Fax: ()	Email:

I hereby make the above application for a Storefront Accessory Grant, declaring all the information contained herein is true and correct, and acknowledging the Town of Minto will process the application based on the information provided.

Signature:	Title:
Printed Name of Signatory:	Date:

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 grant. If you have any questions about the collection, please contact the CAO Clerk at 519-338-2511 ext. 222.

OWNER'S AUTHORIZATION

If the applicant is not the owner, the property owner must complete this section. If there is more than one owner a separate authorization from each individual or corporation is required. Attach an additional page or pages in the same format as this authorization if necessary.

I, _____ being the registered owner of the subject lands, hereby authorize (*print name of applicant*), _____ to submit the above application to the Town of Minto for approval thereof.

Signature:

Date:

Printed Name of Signatory:

Title:

DESCRIPTION OF STOREFRONT ACCESSORIES

- Please provide a written description of the proposed storefront accessories.

PHOTOGRAPHS

- Please attach an image depicting your proposed storefront accessories (bench, bike rack, planter)

WORK ESTIMATES

Please provide the cost estimate (quote) for each storefront accessory that you are applying for.

Please note: Matching up to \$500 total for all elements

Bench	\$
Bike Rack	\$
Planters	\$
Total Business Contribution:	\$
Total Grant Requested:	\$