



# Township of Uxbridge

BUILDING, FAÇADE AND SIGNAGE IMPROVEMENT PROGRAM

2018 APPLICATION PACKAGE

(applications accepted between Dec 1, 2017 and Feb 23, 2018)

A COMPONENT OF THE  
COMMUNITY IMPROVEMENT PLAN





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## The 2018 Uxbridge Building, Façade and Signage Project

This brief questionnaire is designed to help you assess if your planned improvement project is a candidate for funding. It also specifies the 2018 Funding Priorities which will determine which viable project requests will be funded.

- | Yes                      | No                       |  |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | 1. Is the property you are improving located within the CIP boundary?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 2. Can the project be completed within one calendar year?  |
| <input type="checkbox"/> | <input type="checkbox"/> | 3. Will the improvement result in a noticeable and positive change to the <b>appearance</b> of the property?   |
| <input type="checkbox"/> | <input type="checkbox"/> | 4. Is 100% of the improvement taking place on the subject property (i.e. not on the sidewalk, adjacent path, roadway, or allowance of adjacent lands)? |

If you answered ‘yes’ to all of the above questions the property in question will be **eligible for consideration** for funding. Not all eligible projects will be funded.

The Township of Uxbridge will review all applications and evaluate the impact of each project against the 2018 Project Priorities. Project priorities for 2018 are:

Criteria	Score
1. Property is situated in the commercial corridor within the CIP area.	0 1 2
2. Project results in <b>replacement</b> of signage or other façade elements not compliant with the expectations of the Heritage Sign District.	0 1 2
3. Project contributes to the beautification of the overall streetscape and is consistent with the overall look of the neighbourhood.	0 1 2
4. Project increases the likelihood that an empty/underutilized storefront will be occupied.	0 1 2
5. The Township’s financial contribution to the project is 25% or less of the total project cost.	0 1 2

The Township will evaluate all valid applications and reserves the right to select projects based on the comparative merit of the application **in addition to** successful scoring according to these criteria.



## Building, Façade and Signage Improvement Project Project Review Meeting Request

If you feel your project meets the 2018 Building, Façade and Signage Improvement Project criteria and priorities then please complete this form to request a Project Review Meeting.

\_\_\_\_\_  
Name: Daytime Contact Information:

Address of Property: \_\_\_\_\_  
\_\_\_\_\_

Estimated Cost of the Improvement Project: \_\_\_\_\_

Provide a brief description of the Improvement Project:

Please return completed forms to:

Development Services Offices  
Township of Uxbridge  
51 Toronto St. S.  
P.O. Box 190  
Uxbridge, ON  
L9P 1T1

For more information please call 905 852 9181 or email:  
[CIPcoordinator@town.uxbridge.on.ca](mailto:CIPcoordinator@town.uxbridge.on.ca)



## TOWNSHIP OF UXBRIDGE COMMUNITY IMPROVEMENT PLAN

### Application Process

#### Pre-Application

Prior to applying for the program, interested parties are asked to complete the questionnaire on the previous page. The questionnaire will outline the program objectives so interested applicants can assess the fit between the Township of Uxbridge's 2018 Project Goals and the potential improvement project.

#### 1.0 Step One: Application Submission

- 1.01 All applicants must have a Project Review Meeting prior to submitting an application. The Project Review meeting will determine eligibility, scope of proposed work, project timing, and supporting documentation requirements.

To schedule the Project Review meeting contact:

Township of Uxbridge Development Services  
51 Toronto St S.  
Uxbridge, ON  
L9P 1T1  
(905) 852- 9181  
CIPcoordinator@town.uxbridge.on.ca

- 1.02 If applicants wish to proceed after the Project Review meeting then a complete application must be submitted including all required supporting documentation and signatures.
- 1.03 The Township is not responsible for the costs associated with the application process, or any other costs incurred in relation to any of the programs, including financial reviews, audits, etc.
- 1.04 There is no application fee.
- 1.05 The application period opens **December 1<sup>st</sup> 2017** for the **2018** period. Applications must be received at the Township of Uxbridge Development Services department **by 4:00 pm on February 23<sup>rd</sup>, 2018.**



## 2.0 Step Two: Application Review & Evaluation

- 2.01 Township will review and evaluate each application and supporting documentation to confirm eligibility against the criteria. If eligibility is not met then the application will not be approved.
- 2.02 Township staff will visit the site and inspect the property.
- 2.03 Applications will be forwarded to Heritage Uxbridge for comment as part of the review process.
- 2.04 Township staff will use the 2018 Assessment Criteria to evaluate applications. Successful projects will address the priorities and objectives of the 2018 Program. Township staff will prepare a list of successful applications and make a recommendation to Council regarding applicant selection. Council will decide which applicants will receive funding.
- 2.05 No community improvement works shall commence prior to approval of application and the execution of an agreement.
- 2.06 Maximum grant contribution:

**No more than 50% of eligible expenses to maximum of \$5,000 / property.**

## 3.0 Step Three: Grant Approval

- 3.01 If Council approves the application, Township staff shall execute an agreement with the property owner/agent.
- 3.02 Once the agreement is approved, and appropriate building permits etc. obtained, the applicant may commence community improvement works.

## 4.0 Step Four: Payment

- 4.01 Approved applicant has **one year** to complete the approved project from date Building Permit is issued.



- 4.02 Owner/ agent will provide to the Township the following at completion of the project:
- a) Photographic evidence of the completed project.
  - b) Actual cost of project – proof it has been paid for and amount supported by invoices and backup material.
  - c) Other documentation proving completion of project (signed off by appropriate officials eg. Building Department, Engineering etc).
  - d) Other reports and documents as determined in the project agreement.
- 4.03 Staff will perform a site visit and inspection of the building/property.
- 4.04 Staff will review all relevant documents.
- 4.05 Staff will calculate actual financial incentive due.
- 4.06 Staff will confirm that the owner has no outstanding property taxes or other invoices for the year and no outstanding by-law orders against the property.
- 4.07 Township issues approved CIP payment by the Township’s Treasury Department to the applicant/agent.



**TOWNSHIP OF UXBRIDGE COMMUNITY IMPROVEMENT PLAN  
2018 APPLICATION**

*(Please provide answers to all questions provided)*

**Township File Number:** \_\_\_\_\_ (To be completed by Township staff)

**Legal Description of Property for which application is being made:**

**Roll Number:** \_\_\_\_\_ (To be completed by Township staff)

**Is this property in the Downtown Community Improvement area:**

Yes                       No

1. **Date of Application Submission:** \_\_\_\_\_

2. **Name of Owner:** \_\_\_\_\_

Address: \_\_\_\_\_ Tel No: \_\_\_\_\_

Address 2: \_\_\_\_\_ Cell No \_\_\_\_\_

Postal Code: \_\_\_\_\_ Email: \_\_\_\_\_

If corporation: Signing Officer to Contact: \_\_\_\_\_

3.  Applicant is the owner       Applicant is NOT owner\* (complete below)

Name of Applicant: \_\_\_\_\_

Address: \_\_\_\_\_ Tel No: \_\_\_\_\_

Address 2: \_\_\_\_\_ Cell No \_\_\_\_\_

Postal Code: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_

\*If the Property Owner is not the applicant, the owner must complete the Owner Authorization on the final page of this application.

4. **Name of Authorized Agent (if any):** \_\_\_\_\_

Address: \_\_\_\_\_ Tel No: \_\_\_\_\_

Address 2: \_\_\_\_\_ Cell No \_\_\_\_\_

Postal Code: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_





5. Please specify to whom all communication is to be addressed and sent to:

- Property Owner                       Applicant                       Agent

6. Provide names and addresses of any holders or any mortgages, chances or other encumbrances on subject lands (if known):

Name:

Address:

_____	_____
_____	_____
_____	_____
_____	_____

7. Description of land for which application is being made:

a. Legal Description (Lot, Conc, Registered Plan and/or Reference Plan)

\_\_\_\_\_

\_\_\_\_\_

b. Municipal Address (Street and Number)

\_\_\_\_\_

\_\_\_\_\_

8. Are there any easements, right-of-ways or restrictive covenants affecting this property:

- Yes                       No

If yes, please describe:

\_\_\_\_\_

\_\_\_\_\_

9. The subject property designated under Part IV of the Ontario Heritage Act as historically significant:

- Yes                       No                       Unknown

If yes, please provide any available documentation to support the description, or listing, including historical photographs and/or drawings.



10. Are the property taxes for subject property in arrears:

- Yes  No

11. Current MPAC Assessment Value: \$ \_\_\_\_\_

12. Current status of building:

- Occupied  Unoccupied  Under Utilized

13. Has an application for planning approval and/or building permit and any additional required permits been submitted to date:

- Yes  No

14. Please specify use (e.g. residential, commercial etc.):

Existing use:

Proposed use after completion:



SITE SPECIFIC DETAILS:

15. Describe your improvement plan

Existing Condition (Please attach photographs):

Capital improvements that you envision for your project and how they will improve the community or area (please attach illustrations or renderings if applicable):

Applicants may be required to submit the following which will be determined at the Project Review Meeting:

- A – Site Plan and/or professional design/ architectural drawing.
- B – Work Plan and construction drawings.



16. Describe anticipated costs (costs must be supported by two quotes by licensed contractors and attached to application)

COMMUNITY IMPROVEMENT ITEM	COST

TOTAL PROJECT COST: \_\_\_\_\_

Project labour costs that owners plan to undertake themselves (e.g. painting) are eligible as part of facade works. However these DIY labour costs must be identified to ensure that all applicable work is done to code by a licenced professional.

Please indicate anticipated construction dates:

Approximate Start Date: \_\_\_\_\_

Approximate Completion Date: \_\_\_\_\_



## 17. Supporting Materials

In order for an application to be considered complete, the application must be accompanied by all the supporting material which may include but is not limited to:

- Photographs of existing condition.
- Historical photographs/ drawings.
- Specification of proposed works.
- Site plan/ professional drawings.
- Two cost estimates.

These will be identified at the Project Review Meeting.

Office Use Only:

File #: \_\_\_\_\_

Date Received: \_\_\_\_\_



FREEDOM OF INFORMATION

For the purposes of the Freedom of Information and protection of Privacy Act, I authorize and consent to the use by, or the disclosure to, any person or public body of any information that is collected under the authority of the Planning Act/Building Code for the purposes of processing this application.

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Signature of Owner

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Date

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Signature of Applicant  
(If different)

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Date



DECLARATION

I, \_\_\_\_\_ of \_\_\_\_\_

Solemnly declare that:

All of the above statements and the statements contained in all of the exhibits transmitted herewith are true 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. I understand that the Municipality reserves the right to verify any information contained herein. I have read and understand all the rules set out in this application form. All of the above statements and statements contained in all of the exhibits transmitted herewith are true.

DECLARED before me at \_\_\_\_\_  
of \_\_\_\_\_ in the Region/County of  
\_\_\_\_\_ this \_\_\_\_\_ day of  
\_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Applicant's signature

\_\_\_\_\_  
A Commissioner Etc.



AUTHORIZATION OF OWNER

If the applicant is not the owner of the land that is the subject of this application, the authorization set out below must be completed by the owner. This section should be signed by the property owner/s or if held by a corporation, by a signing officer (name and position) of the corporation.

I/we \_\_\_\_\_ am/are aware the owner(s) of the land that is the subject of this application for participation within a Financial Incentive Program under the Township of Uxbridge Downtown Area Community Improvement Plan. I/we authorize \_\_\_\_\_ to make this application on my/our behalf and provide any of my/our personal information necessary for the processing of this application. I acknowledge that the authorized agent is to receive all correspondence and information pertaining to this application on my behalf.

Dated at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date