



## City of Welland

Planning & Development Services  
Department – Planning Division  
60 East Main Street  
Welland, ON L3B 3X4  
Tele: 905-735-1700 Fax: 905-735-8772

### FOR OFFICE USE ONLY

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

Assessment Roll Number \_\_\_\_\_ Assessed Property Value \_\_\_\_\_

2719- \_\_\_\_\_ \$ \_\_\_\_\_

Property Address \_\_\_\_\_

Date Application Received \_\_\_\_\_ Date Application Completed \_\_\_\_\_

Regional File# \_\_\_\_\_

### City of Welland ~ Downtown Improvement Incentive Program Application Form

#### Section A – Property Information – to be completed for all programs

1. Name of Property Owner: \_\_\_\_\_

2. Mailing Address of Property Owner: \_\_\_\_\_

3. Daytime Telephone Number of Property Owner: \_\_\_\_\_

Cell #: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

4. Property Address: \_\_\_\_\_

5. Legal Description of the property: \_\_\_\_\_

(Lot no. Registered plan no. Concession, Reference Plan, etc.)

6. Name of applicant if not the owner: \_\_\_\_\_

7. Daytime phone # of applicant: \_\_\_\_\_

Cell #: \_\_\_\_\_ Facsimile Number: \_\_\_\_\_

8. Address of applicant: \_\_\_\_\_

#### Please place a check next to the program you are applying for:

- Façade Restoration and Improvement Loan
- Development Charge Waiver/Exemption Program (must be approved when building permit is obtained)
- Refund of Local Planning and Building Fees Program
- Residential Conversion and Intensification Loan Program
- Property Rehabilitation and Redevelopment Tax-Increment Grant Program
- Parking Requirements Reduction Program







**City of Welland ~ Downtown Improvement Incentive Program  
Application Form**

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	Staff initials	Comments
Ownership confirmed	_____	_____
Property taxes paid in full	_____	_____
Improvements conform with City Improvement Manual and Urban Design Plan	_____	_____
Work order search (Building)	_____	_____
Fire	_____	_____
Heath/others as required	_____	_____
Conformity to Official Plan	_____	_____
Zoning conformity	_____	_____
Copy of Deed attached	_____	_____
Copy of PIN sheet	_____	_____
Copy of mortgage	_____	_____

<b>Refund of Local Building Fees</b>				
	Fee paid	Refund	Staff initials	Region
Official Plan Amendment	_____	_____	_____	_____
Zoning By-law Amendment	_____	_____	_____	_____
Concurrent Official Plan & Zoning By-law Amendment	_____	_____	_____	_____
Site Plan Control Application	_____	_____	_____	_____
Minor Change to Site Plan Agreement	_____	_____	_____	_____
Processing of Condominium Application	_____	_____	_____	_____
Minor Variance/Change of Use	_____	_____	_____	_____
Consent to Sever	_____	_____	_____	_____
Concurrent Minor Var. & Consent	_____	_____	_____	_____
Building Fees	_____	_____	_____	_____
<b>TOTAL FEES REFUNDED</b>		_____	_____	_____

**Calculation of Cash in Lieu of Parking**

**Confirmation of spaces requested (from page 2 of application)**

# of Spaces \_\_\_\_\_ x \$ \_\_\_\_\_ = \_\_\_\_\_

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**City Development Charges Waived**

<b>Amount</b>	<b>Staff Initials</b>	<b>Regional Charges</b>
_____	_____	_____

**FEES RECEIVED \$** \_\_\_\_\_

\_\_\_\_\_  
Staff signature Date

**PROPERTY REHABILITATION & REDEVELOPMENT TAX-INCREMENT GRANT  
CALCULATION AND PAYMENT RECORD**

Total Value of Improvements Carried Out: (A) \_\_\_\_\_  
(Estimated at time of filing of the Building Permit)

Pre-Development/Redevelopment Assessment Value: (B) \_\_\_\_\_

Post-Development/Redevelopment Assessment Value: (C) \_\_\_\_\_

Total Assessment Increase (Post Value-Pre Value) (C-B)=(D) \_\_\_\_\_  
*Note: Total Tax Rebate cannot exceed Total Value of Improvements (A)*

Property Taxes Paid in Full:	Tax Rebate Calculation	Staff Initials
Year 1:	Max (D) x 80% =	
Year 2:	Max (D) x 80% =	
Year 3:	Max (D) x 70% =	
Year 4:	Max (D) x 70% =	
Year 5:	Max (D) x 60% =	
Year 6:	Max (D) x 50% =	
Year 7:	Max (D) x 40% =	
Year 8:	Max (D) x 30% =	
Year 9:	Max (D) x 20% =	
Year 10:	Max (D) x 10% =	
<b>TOTAL*</b>		

*\*This amount cannot exceed Total Value of Improvements (A)*

**Residential Conversion and Intensification Loan Program  
Calculation of Maximum Loan**

Habitable Sq. Ft. \_\_\_\_\_ Initials of Staff completing Inspection \_\_\_\_\_

Sq. Ft. \_\_\_\_\_ x \$10.00 Sq. Ft. = \$ \_\_\_\_\_

Value of Property \$ \_\_\_\_\_

Has security on the loan been obtained? Yes \_\_\_\_\_ No \_\_\_\_\_  
*(please attach confirmation from Legal Department)*

Maximum Loan Amount \$ \_\_\_\_\_

\_\_\_\_\_  
Staff signature Date

**City of Welland ~ Downtown Improvement Incentive Program  
Application Form**

**Letter of Understanding/Agreement (Sample)**

Dear (Applicant):

Please be advised that your grant application under the City of Welland Downtown Improvement Incentive Program has been approved in the amount of \$ \_\_\_\_\_ for the property located at \_\_\_\_\_ .

Attached is a copy of your application and the calculation sheets used to determine the total value of your grant/loan.

Any unused portion of this grant/loan remains the property of the City of Welland and will be withheld by the City.

Any variance to the terms of the program itemized in the document City of Welland Downtown Improvement Incentive Program shall result in the repayment of the entire grant/loan at the request of the City of Welland.

The City shall not be responsible for any loss, damage, or loss of profit resulting from any works undertaken by the applicant resulting from the use of any financial support arising from the grant/loan program.

The applicant shall at all times indemnify and save harmless the City of Welland from and against any and all manner of claims, losses, costs, charges, actions and other proceedings whatsoever made or brought against, suffered by, or imposed upon any person or property directly or indirectly arising out of, resulting from or sustained as a result of the work associated with all City of Welland Downtown Improvement Incentive Programs.

\_\_\_\_\_  
I/We have read, understand and agree to comply with the terms and conditions as set out in City of Welland Downtown Improvement Incentive Program, for the property municipally identified as:  
\_\_\_\_\_

\_\_\_\_\_  
Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness

\_\_\_\_\_  
Date