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**Community Improvement Plan Grant  
Application Form**  
Municipality of Clarington  
Planning Services Department

Application For (Check Appropriate Boxes)	FOR MUNICIPALITY OF CLARINGTON USE ONLY	
<input type="checkbox"/> Orono <input type="checkbox"/> Newcastle <input type="checkbox"/> Bowmanville	File Number:	
	Date Received:	
Please check appropriate box next to the program you are applying for:	<input type="checkbox"/> Signage <input type="checkbox"/> Infill Project (Orono, Newcastle) <input type="checkbox"/> Reconstruction (Bowmanville) <input type="checkbox"/> Site Plan Control Fee (Newcastle/Bowmanville) <input type="checkbox"/> Façade Improvement <input type="checkbox"/> Upgrade to Building Code <input type="checkbox"/> Building Permit Fee (Bowmanville) <input type="checkbox"/> Accessibility Grant	

**1. Contact Information**

Registered Owner(s):	Address:	Home:
		Business:
		Fax:
		Email:
Applicant:	Address:	Home:
		Business:
		Fax:
		Email:
Cheque for CIP funds should be made out to:		<input type="checkbox"/> Registered Owner name
(please check one)		<input type="checkbox"/> Applicant name
Property Address:		

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**Description of the Proposed Improvements**

1.1 Please give a detailed description of your proposed improvements below (attach an extra page if required). This description should include identification of materials to be used and full details of the project. You may also attach photographs or drawings to help describe the proposed improvement.

**2. Work Estimate**

2.1 Please attach estimates for each component of the proposed improvements. Eligible costs shall be the cost of materials, equipment and contracted labour to complete improvements. If you are applying for more than one grant, you will need one estimate for each. Professional fees such as architects, engineers and solicitors are not considered to be eligible costs. Please summarize these estimates in the table below:

Name/Company	Estimate \$	Phone Number	Grant Program Involved

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### 3. **Completeness of this Application Form**

When this application is submitted, please ensure you are attaching each of the required documents for **each grant** you are applying for. The following must be provided by the applicant for the application to be considered complete:

#### **Signage Grant Program (Orono, Bowmanville, Newcastle)**

- One (1) copy of Sign Permit Application;
- One (1) copy of Drawings, renderings and/or other materials;
- Verification of consultation with Veridian Connections (if applicable);
- One (1) copy of Road Occupancy Permit (if applicable).

#### **Façade Improvement Grant**

- One (1) copy of Building Permit Application (if applicable);
- One (1) copy of Drawings, renderings and/or other materials;
- Verification of consultation with Veridian Connections (if applicable);
- One (1) copy of Road Occupancy Permit (if applicable).

#### **Infill Project or Reconstruction Grant (Orono, Bowmanville, Newcastle)**

- One (1) copy of Building Permit Application;
- One (1) copy of Building Permit Drawings;
- Site Plan Drawings;
- Verification of consultation with Veridian Connections;

#### **Upgrade to Building Code Grant**

- One (1) copy of Building Permit Application;
- One (1) copy of drawings detailing the proposed improvement works;
- Verification of consultation with Veridian Connections;
- One (1) copy of Road Occupancy Permit (if applicable).

#### **Building Permit Grant Fee (Bowmanville)**

- One (1) copy of Building Permit Application;
- One (1) copy of Drawings, renderings and/or other materials depicting the proposed work;

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**Site Plan Control Fee (Newcastle/Bowmanville)**

- One (1) copy of Site Plan Control Application;
- One (1) copy of Drawings, renderings and/or other materials depicting the proposed work;

**Accessibility Grant**

- Outline of work to be completed;
- Details of how it makes your business more accessible;

**Application must be submitted to:**

Planning Services Department  
Municipality of Clarington  
40 Temperance Street, Bowmanville, Ontario, L1C 3A6  
Phone: 905-623-3379 Toll Free: 1-800-563-1195 Fax: 905-623-0830

**4. Signatures and Owner Authorization**

\_\_\_\_\_  
Signature of Applicant (if not property owner)

\_\_\_\_\_  
Print Name

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

Owner Authorization to complete improvements outlined in this application (if the applicant is NOT the property owner)

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

\_\_\_\_\_  
Print Name

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