



**FOR OFFICE USE ONLY**

PID#:  
File No:  
Development Permit No:  
Date Received:  
Documents Complete:  
Date Approved:

**City of Charlottetown**

PO Box 98, Charlottetown, Prince Edward Island C1A 7K2

**FAÇADE IMPROVEMENT GRANT APPLICATION**

Address of Heritage Resource: \_\_\_\_\_

Legal Property Owner: \_\_\_\_\_ Project Co-ordinator: \_\_\_\_\_

Full Mailing Address & Postal Code: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

HOME #: \_\_\_\_\_ BUSINESS #: \_\_\_\_\_ CELL # \_\_\_\_\_

FAX #: \_\_\_\_\_ EMAIL: \_\_\_\_\_

**PROJECT DESCRIPTION:** Provide a description of work proposed and degree of finish expected. Enclose all drawings, current photographs and/or other materials necessary for a complete understanding of the proposed work. Please include any available historical photographs.

Cost Details

(Provide a minimum of two (2) estimates):

Description of Work Proposed:	Name of Contractor	Name of Contractor
Estimated Value of Work (\$)		

**Total estimated project cost:** \_\_\_\_\_

Amount of Grant Applied For (max.30% total cost): \_\_\_\_\_

List Other Sources and Amounts of Funding Requested for the Project: \_\_\_\_\_

Approximate Date of Project Commencement: \_\_\_\_\_

Proposed Completion Date: \_\_\_\_\_

NOTE: 30% of Total Restoration Cost to a maximum of \$50,000 will be covered

**Checklist:** *Check off the list below, and ensure the following are enclosed with your application.*

- I/We have included a document showing legal ownership of the structure. This legal document could be a copy of a deed, a letter of conveyance, or a duly signed affidavit noted by a solicitor, showing legal boundaries.
- I/We have included historical photos or evidence of the building if available as well as drawings and/or specifications detailing work to be undertaken.
- I/We have included a minimum of two official contractor's/carpenter's estimates of the work to be undertaken.
- I/We have read the Grant Guidelines and agree to abide by them.

I/We the undersigned, as property owner(s) or designate(s), make application for a grant in the amount of \$\_\_\_\_\_ to be used for approved work at \_\_\_\_\_.

Applicant's Signature(s): \_\_\_\_\_ Date: \_\_\_\_\_

*Transfer of the grant to the Applicant will be conditional upon approval of funds by City Council, compliance with the eligibility criteria, and the completion of the project to the satisfaction of the Planning Department.*

