

The Planning Act – Section 28

File No.: _____
(Office Use Only)

**APPLICATION FOR CITY OF PORT COLBORNE
BROWNFIELD COMMUNITY IMPROVEMENT PLAN
PROPERTY TAX ASSISTANCE/ REHABILITATION GRANT**

This application form is to be used by persons wishing to apply for Community Improvement Plan funding for the incentive programs offered under the Brownfield Community Improvement Plan by the City of Port Colborne.

The purpose of the *Brownfield Property Tax Assistance Program* is to encourage the remediation and rehabilitation of brownfield sites by providing a cancellation of part or all of the property tax increase on a property that is undergoing or has undergone remediation and development to assist with payment of the cost of environmental remediation. This program only applies to properties requiring environmental remediation and/or risk assessment/management.

The purpose of the *Brownfield Rehabilitation Grant Program* is to encourage the remediation, rehabilitation and adaptive re-use of brownfield sites by providing grants to help pay for remediation costs not fully disbursed by the Brownfield Property Tax Assistance Program and non-environmental rehabilitation costs normally associated with brownfield site redevelopment. This program only applies to properties requiring environmental remediation and/or risk assessment/management.

The Applicant is required to provide appropriate answers to all questions on the application form. If all prescribed information is not provided, the application will not be accepted.

SUBMISSION OF APPLICATION:

Please submit the completed application form and other information as set out herein to:

City of Port Colborne
Planning and Development Department
Planning Division
66 Charlotte Street
PORT COLBORNE, ON L3K 3C8

Part A: General Information and Instructions

Before filling out this application, please read the attached Program Guide and arrange for a pre-application meeting with Staff. The Program Guide describes the purpose, basic terms and conditions of the Brownfield Property Tax Assistance Program and the Brownfield Rehabilitation Grant Program.

1. If an agent is acting for a property owner, please ensure that Form 1 (attached) is completed and signed by the owner.
2. If you find insufficient space on this form to respond to questions, please provide additional information on a separate page and attach to the application form.
3. Please attach to the application the required supporting documents as requested by City Staff, including:
 - a) All environmental studies (Phase I ESA, Phase II ESA, Designated Substances and Hazardous Materials Survey, Remedial Action Plan (RAP), Risk Assessment;
 - b) A detailed work plan and cost estimate (excluding H.S.T.) for the specified environmental site assessment, prepared by a "Qualified Person" as defined by the *Environmental Protection Act* and Ontario Regulation 153/04 for all eligible environmental remediation and risk assessment/risk management works (if not already included in the above environmental studies;
 - c) A cost estimate prepared by a bona fide LEED certification specialist for all eligible LEED program component costs;
 - d) A cost estimate prepared by a bona fide contractor for all rehabilitation/redevelopment costs; and
 - e) A set of detailed architectural/design and/or construction drawings.

An application will not be considered complete until all required documents have been submitted.

4. Please ensure that the application form is complete and that all required signatures have been supplied.
5. Please print (blue or black ink) or type the information requested on the application form.
6. You may deliver your application in person, or send it by mail to:

City of Port Colborne
Planning and Development Department
66 Charlotte Street
Port Colborne ON, L3K 3C8
Attention: Amy Dayboll, Planning Division
7. For more information, please contact Amy Dayboll at 905-835-2901 x 204, or via email at amydayboll@portcolborne.ca.

Details are also available on our website at http://www.portcolborne.ca/page/brownfields_CIP

Part B: Application

PLEASE PRINT NEATLY

Section 3.0 and 4.0 to be completed by the environmental consultant (“Qualified Person”)

1.0 APPLICANT INFORMATION

1.1 Registered Owner(s): _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____

Fax: _____ Email: _____

1.2 If the property owner/application is authorizing an agent to act on his or her behalf in making this application, please complete Form 1, which attached to this application and provide the information requested below. If an agent is authorized, all correspondence will be sent to the authorized agent unless otherwise specified. If no agent is authorized, all correspondence will be sent to the property owner/applicant.

Owner’s Authorized AGENT (if any): _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____

Fax: _____ Email: _____



2.0 PROPERTY INFORMATION:

2.1 Address of Subject Property: _____

Legal Description (Lot and Plan No.): _____

Assessment Roll No.: _____

Current Uses: _____

Size of Property: _____

Is the property designated under Part IV of the Ontario Heritage Act? Yes _____ No _____

Are there any outstanding work orders on this property? Yes _____ No _____

Are there existing building(s) on the property? Yes _____ No _____

If yes, please specify size(s) below:

Building 1 _____ sq ft Building 2 _____ sq ft

Building 3 _____ sq ft Building 4 _____ sq ft

Current property taxes paid annually: \$ _____

Is this property in tax arrears? Yes _____ No _____

If yes, please specify the value of tax arrears: \$ _____

Have the tax arrears been cancelled (in whole or in part) on this property under any City program? Yes _____ No _____

Has or will this property receive grants/loans or other financial assistance from the City under any other City Programs? Yes _____ No _____



If yes, please specify program and amount of financial assistance received from the City

Specify reason for conducting the above-noted environmental study on this property, including a description of the planned redevelopment/rehabilitation of the property being contemplated at this time, and any planning applications that have been submitted/approved.

Please note: Should this application involve more than one (1) parcel of land, the Owner shall provide the Legal Description and Assessment Roll No. for each parcel.



3.0 Environmental Information (this section is to be completed by a Qualified Person as defined by the *Environmental Protection Act* and Ontario Regulation 153/04)

3.1 Name of Qualified Person: _____

Company Name: _____

Mailing Address: _____

City: _____ Province: _____

Postal Code: _____ Telephone: _____

Fax: _____ Email: _____

Declaration of Qualified Person

A Phase II Environmental Site Assessment (ESA) has been conducted on the property described in Section 2.0 of this application, and as of the date the Phase II ESA was completed, the property did not meet the standards that must be met under subparagraph 4i of Subsection 168.4(1) of the *Environmental Protection Act* to permit a record of site condition to be filed under that subsection in the Environmental Site Registry.

Name of Qualified Person

Signature of Qualified Person

Date



4.0 Environmental Information

Describe any known or suspected environmental contamination issues (soil, groundwater) affecting the property in Section 2.0, including:

- a) Type of contaminants;
- b) Extent of contamination;
- c) Causes of contamination (include brief site use history);
- d) Underground storage tanks and current/previous contents;
- e) Above-ground storage tanks, and current/previous contents; and
- f) Other details.

Please attach Phase II ESA Report

Type of Study	Date Study Completed	Study Cost (excluding H.S.T.)	Total Study Grants received from all sources (excluding H.S.T.)	Net Study Cost (excluding H.S.T.)
	[A]	[B]	[C]	[D]=[B]-[C]
Phase I ESA				
Phase II ESA				
Designated Substances & Hazardous Materials Survey				
Remedial Work Plan				
Risk Assessment/Risk Management Plan				
Other (List)				
Total Study Costs				



Describe the proposed remediation/risk management works to take place on the property described in Section 2.0, including:

- a) Approach (background, generic/generic stratified, risk assessment);
- b) Remediation technologies to be employed;
- c) Amount of hazardous and non-hazardous soils/waste (tonnes) to be removed from the site and disposed of at a licensed facility;
- d) Risk management measures to be employed;
- e) Estimated duration in months of the remediation; and/or
- f) Estimated duration of site monitoring.



Provide an estimate of eligible environmental, LEED and rehabilitation costs as shown below. (If cost estimates for items 1-6 below are not included in the attached environmental studies, please attach a detailed work plan containing estimates for each of these costs as applicable.)

Eligible Cost Item	Actual/Estimated Cost (\$)
1. Any costs of Phase II ESA's, Designated Substances and Hazardous Materials Survey, Remedial Work Plans and Risk Assessments not covered by the Environmental Site Assessment Grant Program	\$ _____
2. Environmental Remediation including the cost of preparing an RSC	\$ _____
3. Placing clean fill and grading	\$ _____
4. Installing environmental and/or engineering controls/works as specified in the Remedial Work Plan and/or Risk Assessment	\$ _____
5. Monitoring, maintaining and operating environmental and engineering controls/works as specified in the Remedial Work plan and/or Risk Assessment	\$ _____
6. Environmental Insurance Premiums	\$ _____
Total Costs Eligible for Property Tax Assistance (Sum Costs 1-6 above)	\$ _____
7. Any costs of Feasibility Study not covered by the Feasibility Study Grant Program	\$ _____
8. The following LEED components:	
a) Base plan review by a certified LEED consultant	\$ _____
b) Preparing new working drawings to LEED standard	\$ _____
c) Submitting and administering the constructed element testing and certification used to determine the LEED designation	\$ _____
d) Increase in material/construction cost of LEED components over standard building code requirements to a maximum of 10% of total construction costs.	\$ _____
9. Building demolition (excluding permit fees)	\$ _____
10. Building Rehabilitation and Retrofit Works (excluding permit fees)	\$ _____
11. Upgrading on-site infrastructure including water services, sanitary sewers and stormwater management facilities	\$ _____
12. Construction/upgrading off-site infrastructure including roads, water services, sanitary sewers, stormwater management facilities, electrical/gas utilities, where this is required to permit remediation, rehabilitation and/or adaptive reuse of property that is subject of the application	\$ _____
Total Eligible Costs Eligible for a Rehabilitation Grant (Sum Costs 1-12 above)	\$ _____

Note: Estimates for cost items 1-6 must be prepared by a qualified person
 Estimates for cost items 8a – 8d must be prepared by a LEED specialist
 Estimates for cost items 9-12 must be prepared by a bona fide contractor

Do you wish to apply the total of cost items 1-6 above against development charges payable? Yes _____ No _____

5.0 Project Description

Provide a detailed description (building size/type, number of stories, construction materials etc.) of the proposed development to take place on the property described in Section D once the site has been made environmentally suitable. Include number of new residential units/square foot to be constructed/rehabilitated, commercial/industrial space (square feet) to be constructed/rehabilitates, and types of improvements to be constructed (please attach a set of detailed architectural/design and/or construction drawings).

Estimated construction value of the proposed development	\$ _____
Estimated Post-Project Assessment Value of Land and Buildings (if requested by the City)	\$ _____
Estimated Demolition Start Date (Month/Year)	
Estimated Demolition End Date (Month/Year)	
Estimated Construction Start Date (Month/Year)	
Estimated Construction End Date (Month/Year)	

5.1 Other Sources of Funds

Have you applied for or will you be obtaining any other sources of government funding? (This includes Federal, Provincial, Federation of Canadian Municipalities, etc.) Yes_____ No_____

If Yes, please list other sources and amounts of government funding:

Program	Approval No.	Amount (\$)



6.0 Sworn Declaration

I/WE HEREBY APPLY for tax assistance/a grant under this program.

I/WE HEREBY AGREE to abide by the terms and conditions of the tax assistance/grant program.

I/WE HEREBY AGREE to enter into and abide by an agreement with the City that specifies the terms and conditions of the property tax assistance/grant.

I/WE HEREBY CERTIFY that the information contained in this application is true, correct and complete in every respect and may be verified by the City by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

I/WE HEREBY AGREE that if any statements or information in this application or submitted in support of this application are untrue, misleading or there is a material omission, the application may be rejected or not approved, or the property tax assistance/grant may be delayed, reduced, cancelled or repayment of the property tax assistance/grant may be required.

I/WE HEREBY AGREE that the property tax assistance/grant may be delayed, reduced, cancelled or repayment of the tax assistance/grant may be required if the eligible works are not completed or not completed as approved.

I/WE HEREBY AGREE that any eligible works carried out prior to written receipt from the City of property tax assistance/grant approval are not eligible for the property tax assistance/grant.

I/WE HEREBY AGREE that the program(s) for which application has been made herein is/are subject to cancellation and/or change at any time by the City in its sole discretion, subject to the terms and conditions specified in the program. Participants in the program whose application has been approved and who have entered into a tax assistance/grant agreement with the City will continue to receive tax assistance/grant payments, subject to meeting the terms and conditions in their tax assistance/grant agreement.

I/WE HEREBY AGREE that all property tax assistance/grants will be calculated and awarded in the sole discretion of the City. Notwithstanding any representation by or on behalf of the City, or any statement contained in the program, no right to any property tax assistance/grant arises until it has been duly authorized, subject to the applicant meeting the terms and conditions of the programs and the property tax assistance/grant agreement. The City is not responsible for any costs incurred by the Owner/Applicant in any way relating to the program, including, without limitation, costs incurred in anticipation of property tax assistance/a grant.

Dated at the _____, this _____ of _____, _____
(City/Town of...) Day Month Year

Name of Owner/Applicant or Authorized Agent
Agent

Signature of Owner/Applicant or Authorized Agent



**CONSENT OF THE OWNER TO THE USE AND
DISCLOSURE OF PERSONAL INFORMATION**

Complete the consent of the owner concerning personal information set out below.

I/we, _____ am/are the owner(s) of the land that is subject of this application for the purposes of the Freedom of Information and Protection of Privacy Act, I/we authorize and consent to the use by or disclosure to any person or public body any personal information that is collected under the authority of the Planning Act for the purposes of processing this application.

I/we, _____ as the owner(s) of the land that is subject of this application, further acknowledge that I/WE DO NOT have pecuniary interest whatsoever in the "Cost Estimates" as required and provided with this application.

Signature of Owner(s) _____ Date: _____
_____ Date: _____

AFFIDAVIT

I/We _____
of the City/Town/Township of _____
in the County/District/Regional Municipality of _____

solemnly declare that all the statements contained in this application are true, and I/we 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 and by virtue of the Canada Evidence Act.

DECLARED before me at the _____)
_____ of _____) TO BE SIGNED IN THE PRESENCE OF A
_____) COMMISSIONER FOR TAKING AFFIDAVITS
in the _____ of _____)
This _____ day of _____)
A.D. 20 ____ .)
_____)
(Signature of Owner or Authorized Agent)

A Commissioner, etc.



AUTHORIZATION

LOCATION OF SUBJECT LANDS:

I/We, the undersigned, being the registered owner(s) of the above lands hereby authorize

of _____ the _____ of _____

to make an application on my/our behalf to the Council or the Grant Review Committee for the City of Port Colborne for transaction concerning an application for Planning Fee Grant, Façade Improvement Grant, Sidewalk Café Grant, Applicant and Permit Fees Grant, Residential Intensification Grant, Sign Replacement Grant, Affordable Housing Grant, Shared Parking Grant, Parking Lot Improvement Grant (please circle the appropriate application) in accordance with the *Planning Act*.

Dated at the _____ of _____
in the _____ of _____
this _____ day of _____ 20____

Signature of Witness

Signature of Owner

Signature of Witness

Signature of Owner

Signature of Witness

Signature of Owner

This form is only to be used for applications which are to be signed by someone other than the owner or where more than one owner giving authorization to another owner.

If the registered owner is a corporation, in addition to the signatures of the authorized signing officers, the corporate seal must be affixed.

Where the Owner is without a spouse, common-law or legally married, the Owner is required to sign only once. Where the spouse of the Owner is not an owner, the spouse is required to sign. Spouse shall include a common-law spouse as defined within the *Family Law Reform Act*.