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For Office Use Only			
File #:	_____	Designated Heritage Resource?	<input type="checkbox"/> YES <input type="checkbox"/> NO
PID #:	_____	Located in the 500 Lot Area?	<input type="checkbox"/> YES <input type="checkbox"/> NO
Zone:	_____	Budget Year:	_____
		Received:	_____

## HERITAGE GRANT APPLICATION

### 1. CONTACT INFORMATION

Name: \_\_\_\_\_ Address: \_\_\_\_\_

APPLICANT Phone: \_\_\_\_\_ Cell: \_\_\_\_\_

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

### 2. PROJECT INFORMATION

Property Owner(s): \_\_\_\_\_

Project Location/Address: \_\_\_\_\_

Project Information: *(Provide a description of work proposed and degree of finish expected.)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### 3. APPLICATION REQUIREMENTS

- Enclose all drawings, current photographs and/or other materials necessary for a complete understanding of the proposed work.
- Include any available historical photographs
- Cost details (Provide a minimum of two (2) estimates)

### 4. COST DETAILS

	Contractor 1:	Contractor 2:	Contractor 3:
Name of Contractor:	_____	_____	_____
Estimated Value of Work (\$):	_____	_____	_____

Total estimated project cost: \_\_\_\_\_ Amount of Grant Applied For: \_\_\_\_\_

List other sources and amounts of funding requested for the project:

\_\_\_\_\_

\_\_\_\_\_

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

**5. DECLARATION & SIGNATURE**

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

If the Heritage Grant Application is approved, it is my responsibility to ensure that the approved work described in this application is followed.

When the project has been completed, I commit to submit all invoices/paid receipts from my contractor(s) indicating all payments are made in full in order for the grant to be paid.

I understand that an inspector may be visiting this property to verify that the work will be completed.

SIGNATURE OF  
APPLICANT:

DATE:

**FOR OFFICE USE ONLY:**

**1. APPLICATION VALIDATION**

Development Permit No: \_\_\_\_\_

Documents Complete: \_\_\_\_\_

Eligible for Grant?  YES  NO Date Reviewed: \_\_\_\_\_

*Do not fill-out below portion if application is not eligible for grant*

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

Approved Contractor: \_\_\_\_\_ Grant approved: \_\_\_\_\_

Comments/Notes: \_\_\_\_\_

**2. GRANT PAYMENT INFORMATION**

Invoices indicating payment in full for work that has been completed for the property are provided.

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

Name of Contractor: \_\_\_\_\_

Total Amount Paid: \_\_\_\_\_ Total Payment Requested: \_\_\_\_\_  
(Grant Maximum: \$5,000)

**3. PAYMENT PROCESSING**

Grant Amount Approved: \_\_\_\_\_

Approved by: \_\_\_\_\_ Date Approved: \_\_\_\_\_

Requisition No: \_\_\_\_\_

Purchase Order: \_\_\_\_\_

Receipt No: \_\_\_\_\_

Signature 1: \_\_\_\_\_

Signature 2: \_\_\_\_\_

Distribution No: \_\_\_\_\_

Processed by: \_\_\_\_\_

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

**THIS IS AN APPLICATION ONLY**

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See Reverse for Additional Information