The Pas Community Development Corporation
& The Pas OCN Chamber of Commerce

STOREFRONT IMPROVEMENT APPLICATION

Thank you for applying with us | Only those eligible will be selected, please review eligibility guidelines before applying

The Storefront Improvement Program helps eligible businesses by covering up to 50% of renovation costs, to a maximum of **$2,000**.

A. Applicant Information

Applicant Name:		**Phone:**	
Business Name:		**Email:**	
Property Owner:		**Cell:**	
Contact Person:		**City/Town:**	
Box Number:		**Province:**	

B. Property Information

Municipal Address of Property for which application is being submitted:

Legal Description (Lot/Plan Numbers):

Property has outstanding orders *(fire code, by-law infraction, etc)*? ☐ **Yes** or ☐ **No**

Property in tax arrears or water and/or sewer arrears? ☐ **Yes** or ☐ **No**

C. Improvement Information & Plan

Provide a detailed description of all renovations or improvements proposed for the property. Attach a cost estimate, drawings, plans, or other documents to support application. If no official estimate is required for your scope of work, please include the estimated price of what you plan to do.

Estimated total value of proposed improvements:

Estimated Start Date (Month/Year): **End Date**:

D. General Information and Instructions

1. <u>Agreement:</u> By signing this Form, all Applicants participating in any Storefront Improvement Program agree that they have entered into an agreement with The Pas CDC & The Pas OCN Chamber of Commerce binding them to the conditions and criteria contained in this document and any associated Policy.

2. <u>Application and Approval Required before Work Commences:</u> All Applicants shall submit an application for the specific grant(s) to The Pas CDC & The Pas OCN Chamber of Commerce prior to the commencement of any works. Financial incentives offered in the Storefront Improvement Program will not be offered retroactively for costs incurred prior to the approval of the application.

3. <u>Required Documentation – All Applications:</u> All Applicants shall submit drawings and/or plans, at least one (1) cost estimate and other details with their application as may be required to satisfy The Pas CDC & The Pas OCN Chamber of Commerce with respect to the eligible costs of the project and conformity of the project with the Storefront Improvement Program.

4. Tax Arrears, Other Payments and Claims: Lands or buildings shall not be eligible to participate in the program if they have any tax arrears or any other legal claim, lien, or order that may adversely affect title of the property, other than a mortgage in good standing. All utilities and any other municipal financial obligations must be up to date. Information shall be disclosed in this regard by the Applicant when applying.

5. Eligibility: Each Policy in the Storefront Improvement Program outlines eligible areas, applicants, projects and costs.

6. Public Disclosure of Information: Information regarding the grant amount issued, nature of the project and photographs thereof, total investment of the project by the private sector, and address of the property to which the grants are associated are all public information that will be included in promotional material and/or in media releases published by The Pas CDC & The Pas OCN Chamber of Commerce. Applicants shall permit this information to be released to the public and to participate in public reviews of the program in future.

7. Priority Applications: In the event that the budget remaining for the year is insufficient to fund all applications on hand, projects demonstrating the greatest impact to the community (i.e. job creation and total capital investment) will be chosen for funding.

8. Maximum Total Available per Property: The total amount of financial incentives in the form of grants shall not exceed $2,000 per intake period.

9. Assignee Permission: Approved grants are not transferable to any other property, but may be transferred to a new owner of an approved property, provided the new owner agrees to the terms and conditions of the grant.

10. Approval Process: All applications and agreements must be approved by the The Pas CDC & The Pas OCN Chamber of Commerce Board.

11. Approval Period: Written confirmation of the commitment will be given and will be valid for six (6) months. If eligible improvements are not completed within this time, the commitment may receive a justifiable extension to a maximum of 12 months, at The Pas CDC & The Pas OCN Chamber of Commerce's discretion.

12. Project Completion: The Chief Building Official or designate (and, where required, the Fire Chief or designate) will inspect and approve improvements of the building upon completion, as required. Improvements must be consistent with any existing design guidelines or other policies. For the grant to be paid, the final project must be significantly consistent with the project outlined at the application stage. Otherwise, staff may refuse to issue a grant. If a building is demolished prior to the completion of the related work, the grant is forfeited and will be recovered by The Pas CDC & The Pas OCN Chamber of Commerce.

E. Owner Authorization

I, _____ , am the registered owner of the property that is subject of this application, and I hereby authorize my Agent, _____ to make this application.

Dated at _____ this, _____, of _____, 2027
Town **Day** **Month**

Name of Registered Owner:

_____

Signature of Owner:

_____

F. Sworn Declarations

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

I/WE HEREBY AGREE to abide by the terms and conditions of The Pas CDC & The Pas OCN Chamber of Commerce Storefront Improvement Program and respective Policies.

I/WE HEREBY AGREE by signing below to have entered into an Agreement with The Pas CDC & The Pas OCN Chamber of Commerce specifying the terms and conditions of the grant in this document and related Policy/Policies.

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 Pas CDC & The Pas OCN Chamber of Commerce by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

I/WE HEREBY GRANT PERMISSION to The Pas CDC & The Pas OCN Chamber of Commerce, or its agents, to inspect my/our property prior to, during, and after redevelopment and/or site rehabilitation and project construction, and to take photographs that shall become public information.

I/WE HEREBY AGREE that the program for which application has been made herein is subject to cancellation and/or change at any time by The Pas CDC & The Pas OCN Chamber of Commerce 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 an Agreement with The Pas CDC & The Pas OCN Chamber of Commerce, will continue to receive the approved incentives, subject to the terms of the grant.

I/WE HEREBY UNDERSTAND that the grant can be reduced or cancelled if the agreed work is not completed or if contractors/suppliers have not been paid.

I/WE HEREBY AGREE that all grants will be calculated and awarded in the sole discretion of The Pas CDC & The Pas OCN Chamber of Commerce. Notwithstanding any representation by or on behalf of The Pas CDC & The Pas OCN Chamber of Commerce, or any statement contained in the program(s), no right to any grant arises until it has been duly authorized, subject to the applicant meeting the terms and conditions of the Storefront Improvement Program. The Pas CDC & The Pas OCN Chamber of Commerce is not responsible for any costs incurred by the Owner/Applicant in any way relating to the program(s), including, without limitation, costs incurred in anticipation of a grant.

I/WE HEREBY AGREE that information regarding the grant amount issued, the nature of the project and photographs thereof, the total investment of the project by the private sector, and the address of the property to which the grants are associated shall be disclosed to the public information, included in promotional material and/or in a media release. Applicants shall be required to allow this information to be released to the public and to participate in public reviews of the program in future.

Signed in _____ , Dated this _____, of , _____, 2027
Town, Province **Day** **Month**

_____ X _____

Name of Owner(s)
or Authorized Agent

Signature of Owner(s)
or Authorized Agent

Submit to: The Pas OCN Chamber of Commerce, Box 996, The Pas MB, R9A 1L1

For more information: Phone: **431-355-0645** or Email: **contact@thepasocnchamber.ca**