



THE CORPORATION OF THE CITY OF ST. THOMAS

COMMUNITY IMPROVEMENT PROGRAM EVALUATION COMMITTEE

MARCH 25, 2021

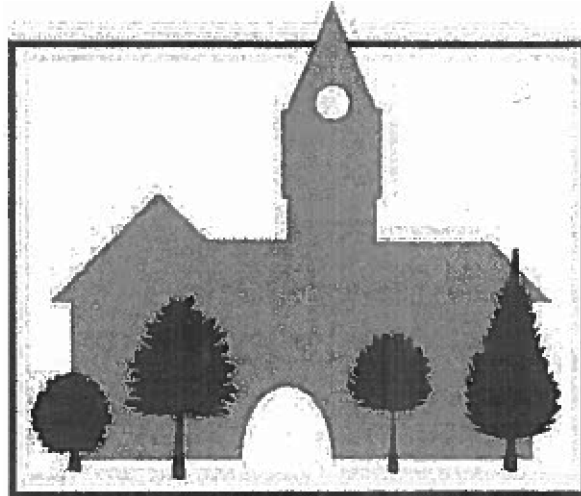
9:00 A.M.

ZOOM MEETING

1. Disclosure of Interest
2. Confirmation of Minutes: December 11, 2020
3. Wendell to provide overview of administration changes related to CIP
4. Project Applications
 - a) 21 Barwick St.
5. Unfinished Business
 - 277 – 283 Talbot - Facade
6. Adjournment

APPLICATION FORM

ST. THOMAS COMMUNITY IMPROVEMENT PLAN FINANCIAL INCENTIVE PROGRAMS



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HERITAGE TAX RELIEF PROGRAM

HERITAGE DESIGN PROGRAM

RESIDENTIAL CONVERSION, REHABILITATION AND INTENSIFICATION PROGRAM

PROPERTY TAX INCREMENT GRANT PROGRAM

FACADE IMPROVEMENT PROGRAM

PLANNING AND BUILDING FEES PROGRAM

DEVELOPMENT CHARGES REBATE PROGRAM

PARKLAND DEDICATION EXEMPTION PROGRAM



FINANCIAL INCENTIVES PROGRAM
 ST. THOMAS COMMUNITY IMPROVEMENT PLAN
 SECTION 10-GENERAL APPLICATION FORM

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INSTRUCTIONS

- a If the space provided is insufficient to respond to the question, please provide additional information on a separate page, clearly marked as to the subject question, and attach to the application form
- a Please attach financial quotes, drawings or other required information as appropriate
- a We recommend that the applicant keep a copy of the application form for your own records
- a To ensure that the application is readable, please fill out online or print in ink
- o Please ensure that the application has been signed by the property owner or authorized agent

1.1 APPLICANT AND PROPERTY INFORMATION

1.1.1 REGISTERED PROPERTY OWNER

Name:	Lillian Wilson				
If Corporation, Signing Officer to contact:					
Mailing Address:	21 Barwick St.				
City:	St. Thomas	Province:	Ontario	Postal Code:	N5P 1Z6
Telephone:	519-631-7285	Facsimile:		Email:	vanderwertcatherine@yahoo.ca

1.1.2 AUTHORIZED AGENT (IF ANY: SEE SECTION 4.3)

Name:	Cathy Vanderwert				
Mailing Address:	PO Box 964, 2 Forest Ave				
City:	Grand Bend	Province:	Ont.	Postal Code:	N0M 1T0
Telephone:	519-238-2930	Facsimile:		Email:	vanderwertcatherine@yahoo.ca

1.1.3 SUBJECT PROPERTY

Civic Address: 121 Barwick Street

Legal Description (Lot and Plan No., Assessment Roll No.):

Assessment # 3421020-100-03500-0000

Brief Description of Current Use:

Residential Private Home

FINANCIAL INCENTIVE PROGRAMS

SUBJECT PROPERTY CONTINUED (1.13)

- Are property taxes for the subject property in arrears? Yes **Q** No
- Are there any outstanding orders registered against the subject property? Yes **ii** No
- Are there any outstanding violations under the Fire Code? Yes **ii** No
- Have grants previously been received from the City for subject property? Yes **D** No _____

Please describe including total amounts of grants:

Estimated Current Market Value of Property: \$ **\$250,000.00**

Please indicate source of estimate: _____

12 AUTHORIZATION

If this application is to be signed by an agent or solicitor on behalf of the property owner/s, complete this section. This section should be signed by the property owners/or if held by a corporation, by a signing officer (name and position) of the corporation.

I hereby authorize Cathy Vanderwerf as agent, to act on my behalf in regard to the above application. I acknowledge that the authorized agent is to receive all correspondence and information pertaining to this application on my behalf.

Dated at January 27 this _____ day of 2021

Signature of Owner/s — [Handwritten Signature] LIII | Q || VII. "

Signature of Witness _____

(Print Name), _____ a duly authorized Commissioner of Oaths

1.3 APPLICANT AGREEMENT

We hereby certify that the information given herein is true, correct and complete in every respect and understand that the City reserves the right to verify any information contained herein. We agree to the terms and conditions of the programs for which the application is being made.

This section should be signed by the property owner/s, agent or if held by a corporation, by a signing officer (name and position) of the corporation.

Dated at January _____ this 27 day of 2021

Signature of Owner/s Lillian Wilson
Mlanderwey

Signature of Witness _____

(Print Name), _____ a duly authorized Commissioner of Oaths

1.4 PROGRAM CHECK LIST

Please place a check next to the programs that you are applying for:

- Heritage Tax Relief Program
- Heritage Design Program
- Planning & Building Fees Program
- Development Charges Program
- Parkland Dedication Exemption Program
- Residential Conversion, Rehabilitation and Intensification Program
- Faade Improvement Program
- Property Tax Increment Equivalent Grant Program

Fill out the following sections with regard to the programs you are applying for.

15 DESCRIPTION OF PROPOSED RESIDENTIAL IMPROVEMENT PROJECT (IF APPLYING FOR RESIDENTIAL IMPROVEMENT PROGRAMS)

New water filtration system or water purifier ... quote or 1,775.00 plus HST	Approximate
Replacing existing tub with a walk in shower ... \$5,000.00 plus HST	Approximate

If additional space is required, please attach the additional information on a separate sheet.

1.7 GENERAL APPLICATION QUESTIONS

1. Is your property a designated heritage building? Yes **D** No

2. Is your property listed by the local Municipal Heritage Committee as a building of historic or architectural value? Yes **D** No

3. What is the current status of the building? **D**
 Vacant
 Occupied
 Underutilized

If other, please explain: _____

4. Are you converting and/or rehabilitating this space? Yes No **D**

If yes: a) are you creating new residential units? Yes **D** No _____

b) are you rehabilitating vacant residential units? Yes **D** No

c) are you bringing occupied residential units up to code? Yes _____ No **D**

5. Are you intensifying and/or redeveloping this space? Yes **D** No

If yes a) are you creating new residential units through the addition of new building space? Yes **D** No

b) are you demolishing existing building(s) to create a new building with new residential units? Yes **D** No _____

How many residential units are being added? _____

6. Are you adding commercial space? Yes **D** No

If yes, please provide the square footage! _____,

7. Please specify the financial incentives you are interested in if applying for the following programs:

a) Residential Conversion, Rehabilitation and Intensification Program
Grant **D** Loan **D** Both **IT**

b) Fade Improvement Program
Grant **D** Loan **Q** Both **D**

FINANCIAL INCENTIVE PROGRAMS

8. If you are applying for the Façade Improvement Program, please specify what part of the building you are making improvements on? (Note: Side and rear faade improvements are eligible only if the public view of the building is significant) c.:

Front Faade **D**

Side Faade **D**

Rear Façade **D**

9. Is your property located in one of the CIP Areas? Yes No **D**

If yes, please specify area. Downtown area

10. Estimated Total Construction Cost for the Residential project: \$6,775.00

11. Estimated Total Construction Cost for Façade Improvement: \$

12. Estimated Total Design and Other Professional Costs: _____

(Note: You will be given estimates for funding on grants and loans based on the above estimates. The final calculations of grants and loans will be based on the Building Permit Value for Construction costs and actual receipts for Design and Professional costs).

13. Have you made an application for a Building Permit pertaining to the work proposed? Yes **D** No

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DECK RAILING LTD

Date: January 25,2021

Customer Name: Rob Paglrari

Estimate Number -21-021

Address: 21 Barwick St., St. Thomas

Phone: 519-818-1398

Email Address: rob.lecs@icloud.com

Description

Approximately 23 In ft of 42" high white wide picket railing system and approximately 6 In ft of white wide picket stair railing system, complete with all required components and fasteners.

Supply & Install - \$1,775 + HST

Notes:

- Estimate is based on dimensions sent via email on January 21,2021.
- To Include removal and disposal of existing railings add \$150 + HST to the above price.
- Price excludes all Permits and related Fees.
- Price is open for acceptance within 30 days of the date of this quote.

Term and Conditions:

50% down payment is required with confirmation of order and balance in full is due when material is ready for shipment. Payment to be made by e-transfer sent to accounts@ontariodeckrailing.com, cheque made out to Ontario Deck Railing Ltd., or credit card. Remittance of payment certifies acceptance of the terms of the quote.

Matt Stelpstra

Ontario Deck Railing Ltd.

600 Newbold St., Unit 3, London On

Phone: 226-984-1081

E-mail: matt@ontariodeckrailing.com