

Pre-Application Consultation

Prior to the submission of this application, applicants are strongly encouraged to consult with staff of Planning Services in the Development Services Department. Early consultation can result in the identification of matters that will significantly assist in the processing of the application.

Questions in respect to the application and process or requests with staff before an application is submitted may be made in person at: Planning Services, City Hall, 8th Floor, Rundle Tower, 50 Centre Street South, Oshawa, by telephone at 905-436-3853 or by email at planning@oshawa.ca.

Submission Requirements

- One (1) copy of a fully completed application is submitted to:
Director, Planning Services
Development Services Department
Corporation of the City of Oshawa
50 Centre Street South (8th Floor)
Oshawa, Ontario L1H 3Z7

Note:

1. Completed applications are to be submitted before a building permit application. Upon acceptance of your application, you will be provided a committal letter advising of your eligibility for the program subject to any terms and conditions contained in the committal letter.



Harbour Road Area Community Improvement Plan Application

Office Use
File Number:
Checked by:

1. Registered Owner/Agent

Name	Mailing Address	Contact Information
Registered Owner*		Telephone
		Fax
		Email
Agent		Telephone
		Fax
		Email

* If more than one Registered Owner, please attach a sheet of paper with the required information. If numbered company, give name and address of principal Registered Owner.

2. Property Information

Location and Description			
Municipal Address(es) (Street Number and Name of Street)			
Lot(s)	Concession(s)	Former Twp.	
Registered Plan Number	Lot(s)/Block(s)	Reference Plan Number	Part Number(s)

Existing use:	
Current Oshawa Official Plan designation:	
Current Zoning:	

3. Increased Assessment Grant Program

Please provide an estimate of the post-development assessment value to serve as a basis for the Increased Assessment Grant Program.

(a) Brief description of project (e.g. number and type of units):

(b) Construction Schedule:

Approximate date of Construction commencement:

Approximate date of Construction completion:

(c) Estimate of increase in assessed value:

Current cumulative assessed value:

Estimated post development assessed value:

Post development captured assessed value (post minus current)

(d) Status of Taxes on the lands that are the subject of this Application:

Have all applicable taxes been paid on the lands that are the subject of this application?

Yes No

4. Covenant

I/We hereby apply for an Increased Assessment Grant under this Community Improvement Plan and agree to abide by the terms and conditions of the programs.

Without limiting any of the foregoing, I/we understand that the grant may be reduced or cancelled if the work is not completed as approved or if the applicant does not comply with the conditions of the City of Oshawa.

I/We agree to the terms and conditions.

I/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.

I/We, the undersigned, agree that the completed improvements are subject to inspection by City Officials and will be carried out in accordance with the requirements of the Community Improvement Plan, the Building Code, Fire Code and other applicable City of Oshawa by-laws.

Date

Signature of Registered Owner or Authorized Signing Officer of the Corporation

Title

I/We have the authority to bind the company

Date

Witness

5. Authorizations

If this application is to be signed by an agent or solicitor on behalf of an owner, please complete this section. If the property is in joint ownership, each individual signature is required. If the applicant is a corporation, the application shall be signed by an officer of the corporation and the corporation's seal shall be affixed.

I, _____ (the Owner/Grantor) hereby authorize _____ (solicitor/agent) to act on my behalf in regard to the above application.

Dated at the _____ of _____ in the _____

of _____ this _____ day of _____ in the year of _____.

Signature of Grantor(s)

Name (please print)