



District of Houston
3367-12th Street
PO Box 370
Houston, BC V0J Z0
Tel 250 845-2238 Fax 250 845-3429
www.houston.ca

Business Façade Improvement Program:
Grant Application

APPLICANT INFORMATION

Applicant Name:
Mailing Address:
Building Address:
Email: Phone:
Property Owners Name:
Email: Phone:
Letter of Authorization Attached: [] Yes [] No

[Large empty lined area for additional information]

Proposed Start Date: _____
 Planned Completion Date: _____
 Estimated Total Project Cost: _____

PROJECT COST BREAKDOWN	
	Costs (estimates)
Design/Architectural	\$
Mechanical/Electrical	\$
Structural	\$
Materials/ Supplies	\$
Other	\$

APPLICANT CHECKLIST	ATTACH TO APPLICATION
<input type="checkbox"/> Property Taxes Paid	<input type="checkbox"/> Photos of Existing Conditions
<input type="checkbox"/> Utility Taxes Paid	<input type="checkbox"/> Detailed Specifications and Associated Costs
<input type="checkbox"/> License Fees Paid	<input type="checkbox"/> Cost Estimates from Contractors
<input type="checkbox"/> Required Permits Approved	<input type="checkbox"/> Drawings, Materials, and Colour Samples
	<input type="checkbox"/> Property Owners Authorization

TERMS AND CONDITIONS

I, _____, of _____ have read the complete
(Applicant) (Business/Building)
 application and concur with and give my consent to the work proposed in the application.

I assume all responsibility for obtaining appropriate architectural drawings, building permits and inspections, and hiring of contractors as necessary.

I agree not to involve the District of Houston in any legal action between myself and any contractors, estimators, employees, workers or agents arising from or out of the Business Façade Improvement Program.

I give consent to the District of Houston to make all inspections necessary to confirm that the approved plans are implemented in accordance with expected standards.

Payment of approved grants will be made upon the applicant providing proof of final completion of the proposed improvements along with verifications of expenditures and proof of final inspection (when required).

I understand all submissions must be in by July 31, 2016.

Signature: _____ Date: _____

Printed Name: _____

Letter of Authorization

Date: _____

Property Information (as indicated on BC Land Title Certificate)

Civic Address: _____

Legal Description: Lot/Parcel _____ Block _____ Plan _____ Dist. Lot _____

Folio Number (000000.000) _____ Parcel ID (PID) _____ - _____ - _____

I am the **owner** of the above referenced property and hereby authorize:

Representative/Contact: _____

Of: _____ **Tel. No.** _____

Email: _____

Please check ✓ where applicable

To represent me in an application for:

- Building Permit Application
- Demolition Permit Application
- Sign Permit Application
- Land Use Application
- Business Façade Improvement Program
- Other (please specify) _____

To review civic files and obtain copies of:

- Civic files
- Specific Property Information as per a PIR
- Other _____

Owner's Information

Name: _____

Address: _____

Telephone # _____ **Email:** _____

Date: _____ **Signature:** _____