

COMMUNITY IMPROVEMENT PLAN (CIP)

GENERAL INFORMATION AND INSTRUCTIONS



This Application Package is available at
vaughan.ca/CIP
For more information contact:
CIP@vaughan.ca or 905-832-2281 ext. 8472

1. Before filling out this application form, **please read the attached Program Guide and CIP By-Laws**. The Program Guide describes the purpose, basic eligibility requirements, and application process for the **Community Improvement Plan**. The CIP application must be submitted as a complete application for the subdivision or site development application. If additional information is required regarding this application or the approval process, please contact City staff at the email or phone number listed above.
2. If an agent is acting for the property owner, or the applicant is not the property owner, please ensure that the required authorization is completed and signed by the owner as provided in **Section F**.
3. If you find insufficient space on this form to respond to questions, please provide additional information on a separate page and attach to your completed application form.
4. Please ensure that the application form is complete and that all required signatures have been supplied.
5. Please print (black or blue ink) or type the information requested on the application form.
6. You may deliver your application in person or send it by mail to:
City of Vaughan
Development Planning Department
2141 Major Mackenzie Drive
Vaughan, ON L6A 1T1

COMMUNITY IMPROVEMENT PLAN (CIP)



APPLICATION FORM

CIP Application File Number: _____

Development Application File Number(s): _____

PART A: REGISTERED OWNER/APPLICANT INFORMATION (PLEASE PRINT)

NAME OF REGISTERED PROPERTY OWNER:

Last Name: _____ First Name: _____

Corporation/Partnership: _____

Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____

Phone: _____ Email: _____

NAME OF APPLICANT: Applicant is Owner or Authorized Agent of Owner

Last Name: _____ First Name: _____

Mailing Address: _____ City: _____ Prov: _____ Postal Code: _____

Phone: _____

IMPORTANT NOTE: If the Applicant(s) is not the Registered Owner(s) of the property, the Registered Owner(s) MUST complete and sign the Registered Owner's Authorization form in Part D. In the absence of such Registered Owner's Authorization, **no further consideration of this Application will be made.**

PART B: PROPERTY INFORMATION (PLEASE PRINT)

MUNICIPAL ADDRESS OF SUBJECT PROPERTY:

Legal Description of Property (lot, plan, assessment roll, PIN): _____

Are the Property Taxes in good standing on this property? Yes No

Are there any liens or legal proceedings against this property? Yes No If YES, please provide details:

PART C: PROJECT DESCRIPTION (PLEASE PRINT)

Please describe the proposed construction project and what you hope to achieve through accessing the CIP Programs:

Proposed Primary Use(s):

Site Size (ha):

Total Proposed Project Size (GFA in sq. m.):

Proposed Office Component (GFA in sq. m.):

Project Estimated Value (\$):

Proposed Number of Residential Units:

Principal Tenant(s), if known:

Approximate Construction Start Date:

Approximate Construction End Date:

Is the project part of a phased development? If yes, please provide details:

PART D: REGISTERED OWNER'S DECLARATION (PLEASE PRINT)

TO BE COMPLETED BY THE OWNER (IF OWNER AND APPLICANT ARE THE SAME):

I _____ hereby certify that:

(PLEASE PRINT NAME AND TITLE, IF APPLICABLE)

1. CHECK ONE: I am the registered owner of the property that is the subject of this application; OR

_____ is the registered owner of the property that is the subject of this application.

(PLEASE PRINT COMPANY OR PARTNERSHIP NAME)

- 2. The Information contained in this application, any attached schedules, plans and specifications and other documentation is true to the best of my knowledge and belief.
- 3. I have reviewed and understand the City of Vaughan CIP by-laws (176-2015 and 177-2015)
- 4. I have authority to bind the corporation or partnership, if applicable.

Signature:

Date:

Name and Title (if applicable):

Personal information on this form is collected under the legal authority of the Municipal Act, R.S.O. c M.45 (as amended), the Municipal Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c M.56 and the Planning Act, R.S.O. 1990, c P.13. This information will be used to process the Community Improvement Plan application. As a public record, information contained on this application and the documents required to grant the financial incentives may be disclosed to any individual under the Municipal Freedom of Information and Protection of Privacy Act. Questions about this collection should be directed to the Access and Privacy Office, City Clerk's Office, 2141 Major Mackenzie Drive, Vaughan, ON L6A 1T1, 905-832-2281 ext. 8987.

PART E: APPLICANT'S DECLARATION (PLEASE PRINT)

TO BE COMPLETED BY THE APPLICANT (IF THE APPLICANT IS AN AUTHORIZED AGENT OF THE OWNER AND NOT THE OWNER ITSELF):

I/We _____ hereby certify that:

(PLEASE PRINT NAME AND TITLE, IF APPLICABLE)

1. The information contained in this application, any attached schedules, plans and specifications and other documentation is true to the best of my knowledge and belief.
2. I am the Authorized Agent of the Owner with respect to the making of this application.
3. I, and the owner, have reviewed and understand the City of Vaughan CIP by-laws (176-2015 and 177-2015)

Signature: _____ Date: _____

Name and Title (if applicable): _____

PART F: REGISTERED OWNER'S AUTHORIZATION (PLEASE PRINT)

TO BE COMPLETED BY THE OWNER, IF THE APPLICANT IS NOT THE OWNER:

I _____ hereby certify that:

(PLEASE PRINT NAME AND TITLE, IF APPLICABLE)

1. CHECK ONE: I am the registered owner of the property that is the subject of this application; OR
 _____ is the registered owner of the property that is the subject of this application.
(PLEASE PRINT COMPANY OR PARTNERSHIP NAME)

2. _____ is authorized to make this application on behalf of the Registered Owner and to provide any of the Registered Owner's personal information necessary for the processing of this application.

Signature of Registered Owner: _____ Date: _____

Name and Title (if applicable) _____

PART G: ACKNOWLEDGEMENT OF PUBLIC INFORMATION (PLEASE PRINT)

TO BE COMPLETED BY THE OWNER:

I _____ hereby certify that:

(PLEASE PRINT NAME AND TITLE, IF APPLICABLE)

1. CHECK ONE: I am the registered owner of the property that is the subject of this application; OR

_____ is the registered owner of the property that is the subject of this application.

(PLEASE PRINT NAME AND TITLE IF APPLICABLE)

I/we are the owner of the land that is the subject of this application and for the purpose of the Municipal Freedom of Information and Protection of Privacy Act, do authorize and consent to the use by or the disclosure to any person or public body of any personal information that is collected for the purposes of processing this application.

I/we hereby consent to the City of Vaughan making this application and its supporting information available to the general public.

I/we hereby consent that the materials collected as part of this application may be reproduced by the City of Vaughan publications/materials/ website, including marketing and promotional materials.

Where the registered owner is a corporation, the signature below is also confirmation that I/We have the authority to bind the Corporation.

Signature of Registered Owner:

Date:

Name and Title (if applicable):