

File #:	
Cross Reference:	- ,
Roll #:	

## FINANCIAL INCENTIVES FOR TOWN CENTRE COMMUNITY IMPROVEMENT PLAN

**Tax Increment Financing Application** 

1.	Name of registered property owner:
Ma	iling Address:
	Postal Code:
Tel	ephone Number:
Apı	olicant Email:
2.	Name of applicant - (if applicant is other than owner, letter of Authorization from the owner must be attached).
Ма	iling Address:
	Postal Code:
Tel	ephone Number:

3.	Name of Agent - (if applicable)	
Mai	Mailing Address:	
	Postal Code:	
Tele	ephone Number:	
4.	Description of Property:	
Tow	vnship: Township Lot:	
Con	ncession: Registered Plan (RP:	
RP	Lot or Block: Parcel:	
Stre	eet Name and Number :	
5.	Project Information:	
Buil	Iding Permit Number: Date of Permit:	
Esti	imated Value of Construction:	
Cur	rent Year, Current Value Assessment:	
Cur	rent Year Taxes Levied:	
	scription of Improvements (attach drawings):	

- Please note that taxes must not be in arrears at the time of application
- Please note that if the property is the subject of a tax appeal, the appeal must be finalized prior to the calculation of the Tax Increment