



Development Services Commission
 101 Town Centre Boulevard
 Markham, Ontario, L3R 9W3
 (905) 475-4861

COMMERCIAL SIGNAGE REPLACEMENT GRANT APPLICATION

The purpose of this program is to facilitate the replacement of inappropriate commercial signage in heritage districts. The grant assistance is in the form of a 50/50 matching grant, which is paid upon inspection of the approved signage. The program offers a matching grant for eligible work to a maximum limit of \$1,000 per commercial establishment. Review the specific grant program information package and the terms and conditions.

PROPERTY INFORMATION									
Municipal Address:		Street No.:		Street Name:				Unit Num.:	
Commercial Name (if applicable)									
OWNER and APPLICANT INFORMATION									
Property Owner Information (check one)					Person(s)			Company	
Registered Land Owner:		Surname:			First Name:				
Name		(if Company)			Company Officer:				
Address:		Street No.:		Street Name:				Unit Num.:	
Municipality:		Province:			Postal Code:		Postal Code:		
Telephone:		No. ()		Fax: ()			E-Mail:		
Applicant Information (if different than Owner):									
Application Contact:		Surname:			First Name:				
Address:		Street No.:		Street Name:				Unit Num.:	
Municipality:		Province:			Postal Code:		Postal Code:		
Telephone:		No. ()		Fax: ()			E-Mail:		
<p>I hereby make the above application for a Commercial Signage Replacement Grant, declaring all the information contained herein is true and correct, and acknowledging the City of Markham will process the application based on the information provided.</p>									
Signature:					Title:				
Printed Name of Signatory:					Date:				



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OWNER'S AUTHORIZATION

Tenants are required to secure the property owner's consent to the signage improvements. Written consent may be either in the form of a lease indicating the lease's authority to undertake changes to the signage (please attach), or completion of the owner's authorization below. If there is more than one owner, a separate authorization from each individual or corporation is required. Attach an additional page or pages in the same format as this authorization if necessary.

I, _____ being the registered owner of the subject

lands, hereby authorize (*print name of applicant*),

to submit the above application to the City of Markham for approval thereof.

Signature:

Date:

Printed Name of Signatory:

Title:

