



## Town of Perth

### **Secondary Unit Grant Program – Application Form**

#### **Registered Owner:**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_  
Home Phone: \_\_\_\_\_  
Work Phone: \_\_\_\_\_  
Email Address: \_\_\_\_\_  
Fax: \_\_\_\_\_

#### **Property Description:**

Address: \_\_\_\_\_  
Postal Code: \_\_\_\_\_

#### **Project Estimate: (Attach a copy of quote)**

Company name: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Estimate: \_\_\_\_\_  
(excluding HST)

#### **Eligible Grant Amount:**

The Town of Perth Secondary Unit Grant Program will provide a grant to the applicant equal to \$5,000 for works related to constructing a new second dwelling unit or second dwelling. One (1) invoice from a qualified contractor must be obtained to determine the allowable funding.

I/WE HEREBY CERTIFY that the information contained within this application is true, correct and complete in every respect and may be verified by the Town by such inquiry it deems appropriate, including inspection of the property for which the application is being made.

I/WE HEREBY AGREE that if any statements or information in this application or supported in support of this application are untrue, misleading or there is a material omission, the application may be rejected or not approved, or the grant may be delayed, reduced or cancelled.

I/WE HEREBY GRANT permission to the Town, or its agents, to inspect my/our property that is the subject of this application.

I/WE HEREBY AGREE all grants will be calculated and awarded at the sole discretion of the Town. Notwithstanding any representation by or on behalf of the Town, or any statement contained in the program, no right to any grant arises until it has been duly authorized, subject to the application meeting the terms and conditions of the program and the grant agreement. The Town is not responsible for any costs incurred by the Owner/Applicant in any way relating to the program, including, without limitation, costs incurred in anticipation of a grant.

Dated the \_\_\_\_\_ of \_\_\_\_\_, \_\_\_\_\_  
**Day Month Year**

\_\_\_\_\_  
**Name of Owner**

\_\_\_\_\_  
**Signature of Owner**