



**DOWNTOWN STOREFRONT ENHANCEMENT PROGRAM
Application Form**

PART A: DESIGN PHASE

| APPLICANT INFORMATION | | | |
|--|---|--|--|
| Date: | | | |
| Applicant name: | | Contact person: | |
| Mailing address: | | | |
| Telephone number: | | Fax: | |
| Email address: | | | |
| <i>Applicant is the:</i> | Property owner <input type="checkbox"/> | Agent of the property owner <input type="checkbox"/> | |
| Property owner name: | | Contact person: | |
| Mailing address: | | | |
| Telephone number: | | Fax: | |
| Email address: | | | |
| PROJECT DESCRIPTION | | | |
| Street address: | | | |
| Legal description: | | | |
| Heritage building: | Yes <input type="checkbox"/> | No <input type="checkbox"/> | |
| Number of storeys: | | | |
| Current use: (Retail – Restaurant – Office – Other Commercial – Residential – Other) | | | |
| At ground floor: | | Tenant: | |
| At second floor: | | Tenant: | |

PART B: FUNDING PHASE

| PROJECT ESTIMATES | |
|-----------------------------------|----|
| Total cost of improvements: | \$ |
| PROJECT TIMELINES | |
| Proposed construction start date: | |
| Proposed completion date: | |

| APPLICANT DECLARATION |
|---|
| I understand that my submission of an application does not constitute a guarantee for funding under the Downtown Storefront Enhancement Program. I certify that all information is true and accurate to the best of my knowledge, |

| | |
|--|------|
| Applicant Signature | Date |
| Name (please print) | |
| AUTHORIZATION FOR AGENT OF THE PROPERTY OWNER (complete only if Applicant is not the registered Property Owner) | |
| I/We, _____ the owner of the subject property hereby authorize _____ to act on my behalf with respect to the application. | |
| Signature of Property Owner | Date |

| FOR OFFICE USE ONLY | |
|--|----------|
| Date Received: | |
| Application complete: Yes <input type="checkbox"/> No <input type="checkbox"/> | Details: |
| Date of application review: | |
| Decision: Approve <input type="checkbox"/> Approve with conditions <input type="checkbox"/> Refuse <input type="checkbox"/> | |
| | |

*The application must adhere to the criteria and design guidelines as laid out in the Downtown Storefront Enhancement Program package.
 **The application will be reviewed by the Planning & Development department to ensure compliance with the City of Lacombe’s land use bylaw and Downtown Area Redevelopment Plan.

If you have any further questions about completing this application, or to submit a completed application form, please contact: Community Economic Development Manager by phone at **403-782-1263** or by e-mail at glapointe@lacombe.ca

Completed applications forms can also be mailed to:
 Guy Lapointe
 City of Lacombe
 5432 – 56 Avenue
 Lacombe, Alberta T4L 1E9

Personal information collected in this application form is confidential & collected for the purpose of administrating the Downtown Storefront Enhancement Program and to maintain communications as considered necessary. Please note, that the name & location of the buildings and façade improvement designs may be released to various organizations, the media & the public, insofar that the building received approval under the Downtown Storefront Enhancement Program.