

REGIONAL INCENTIVES PROGRAM

FINAL REPORT



Where Ontario Began





APPLICANT INFORMATION	
Name of Applicant:	
Mailing Address:	
Phone:	Email:
GRANT INFORMATION	

Please indicate the Regional Incentives Grant(s) you have been awarded and project costs.

Stay, Discover Grow Grants	Amount of Grant Awarded	Project Costs
Façade, Signage, and Property Improvement		
Façade Improvement – Basic		
Façade Improvement – Enhanced If outdoor art is a component and/or building has more than one street address and/or storefront, or if building has more than one wall that is visible from a public street, or fronts onto a laneway or parking lot.		
Signage Improvement – Basic		
Signage Improvement – Enhanced If building has more than one street address and/or storefront, or if the building has more than one wall that is visible form a public street, or fronts onto a laneway or parking lot.		
Property Improvement Life-cycle replacement will not be considered. Improvements must be above and beyond general maintenance.		
Building Improvement/Restoration		
Building Conversion/Expansion (under 5,000 Square Feet)		
Building Conversion/Expansion (over 5,000 Square Feet)		
Feasibility, Design, and Study		
Planning Application and Building Permit Fee		
TOTALS – Excluding HST	\$	\$





PROJECT RESULTS SUMMARY
How did your project achieve one or more of the economic goals of the Regional Incentives Program?
How did the funding make a positive impact on your business/property? Any lessons learned?
How would you suggest improving the Regional Incentives Program? Were there any challenges? Wou
you recommend this Program to others?
Please share a brief testimonial about your experience with the Regional Incentives Program. Your quote may be used by SDG Counties for future promotional materials.





CONFIRMATION OF	OUTSTANDING	PFRMITS	OR TAXES
	COISIAIDIIIG	LIMITIO	

Are there any outstanding building permits, property so ther outstanding Municipal/County accounts receiva	
☐ Yes. If yes, please list:	are on the subject property.
□ No	
PHOTOGRAPHY	
Please submit good quality digital photos of the comp be attached to your email as JPEGs or Tiff files.	leted project with your final report. They should
EXPENSE CLAIM	
Attach to this report a breakdown/summary of your p clearly marked as paid in full, and/or receipts. All recemanner. You will also be asked to provide proofs of pareceipts, returned cheques or banking statements.	eipts should be itemized in a clear and concise
Eligible costs are those deemed necessary as stipulate approved as part of your contract will not be reimburs	
NEXT STEPS	
Please complete and sign this document and email it to Tara Kirkpatrick at tkirkpatrick@sdgcounties.ca and fo ext. 1227.	_
Once claims have been finalized, the funds will be trancan issue the payment of eligible grants.	nsferred to your local municipality, so that they
Date:	
Name of Applicant	Signature of Applicant
Name of Applicant	Signature of Applicant

