

# ATTACHMENT B

## Vandalism Relief Grant Application Form:

*\*\*\*All applicant businesses shall be situated in the downtown area bounded by Comox Road, Milton Street and Front Street in the catchment areas of the Downtown Business Association, Old City Quarter Business Association, or Victoria Crescent Community Association, as identified on the attached map.*

Business Name: \_\_\_\_\_

Primary Name: \_\_\_\_\_

Business Address: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Business Email: \_\_\_\_\_

Business License Number: \_\_\_\_\_

Are you in Good Standing with the City? (In order to proceed, you must be in good standing with the city): Y/N

Have you submitted a claim within this calendar year? Y/N

If so, what date? \_\_\_\_\_

Date and Time of Vandalism Incident: \_\_\_\_\_

Full Description of Property Damage: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Vandalism Relief Grant Amount Requested: \_\_\_\_\_

Acceptable proof of damage and expenses, in one or more of the following forms:

- i) Receipts for repairs of damage
- ii) Photographs of damage; or
- iii) Police file number, where applicable

Confirmation of any expenses to be recovered through the Applicant's Insurance: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I hereby acknowledge that the information provided on this application is true and that the Grant amount requested is not covered by my Insurance.

Printed Name: \_\_\_\_\_

Signed Name: \_\_\_\_\_

Date: \_\_\_\_\_

Grant Approved: \_\_\_\_\_

Cheque Number: \_\_\_\_\_