



Department of Community & Development Services
 1593 Four Mile Creek Road
 P.O. Box 100, Virgil, ON L0S 1T0
 905-468-3266 • Fax: 905-468-0301

www.notl.com

HERITAGE PERMIT AND HERITAGE GRANT APPLICATION

Under the Ontario Heritage Act, R. S. O. 1990, c. O. 18 (as amended)

1. PROPERTY OWNER INFORMATION

PROPERTY OWNER NAME

Niagara North Condominium Corporation #93 c/o Shabri Properties Ltd.

PROPERTY OWNER MAILING ADDRESS

PO Box 877, St. Catharines, ON L2R 6Z4

STREET NUMBER

57

STREET NAME

Queen Street

PO BOX

CITY

NOTL

PROVINCE

Ontario

POSTAL CODE

L0S 1T0

PHONE NUMBER

905-684-6333

ALTERNATE PHONE NUMBER

905-980-0318

EMAIL ADDRESS***

aprilh@shabriproperties.com

IS THE APPLICANT ALSO THE OWNER OF THE PROPERTY?

YES (IF YES PROCEED TO SECTION 3) NO

2. APPLICANT INFORMATION (IF AN AGENT HAS BEEN AUTHORIZED)

APPLICANT NAME

April Hurst - Property Manager (Shabri Properties Ltd.)

APPLICANT MAILING ADDRESS

NNCC#93 C/O Shabri Properties Ltd

STREET NUMBER

26

STREET NAME

Hiscott

PO BOX

877

CITY

St.Catharines

PROVINCE

Ontario

POSTAL CODE

L2R 6Z4

PHONE NUMBER

905-684-6333

ALTERNATE PHONE NUMBER

905-980-0318

EMAIL ADDRESS***

aprilh@shabriproperties.com

***By providing an e-mail address you agree to receive communications and notices from the Town by email

3. SUBJECT PROPERTY(IES) INFORMATION

MUNICIPAL ADDRESS

57 Queen Street

LEGAL DESCRIPTION

NNCC93

ROLL NUMBER

134586829RT0001

ONTARIO HERITAGE ACT DESIGNATION

PART IV

PART V

IS THE PROPERTY IN THE TOWN'S IDENTIFIED AREA OF ARCHAEOLOGICAL POTENTIAL

YES

NO

4. PROPOSED ALTERATIONS

(a) Specify, in detail, all proposed alterations to the property and structures on the property. Attach additional pages as necessary:

No alterations will be made to the building facade, only repairs to damaged or rotting wood.

- Remove flat stock in areas where wood is rotted or damaged, and replace with white/clear pine to match existing.
- Remove and replace molding and trim details as needed with white/clear pine.
- Remove and replace window sills as necessary with matching white/clear pine.
- Scrape all lap siding and patch any holes as needed.

(b) Explain the reasons for the proposed alteration:

weather damages

(c) Explain how the proposal enhances the cultural heritage attributes of the property and/or meets the policies of the Heritage Conservation District Plan:

N/A

(d) Are any alterations proposed to trees or landscaping? If so, please explain

n/a

HERITAGE ATTRIBUTE(S) TO BE IMPACTED	EXISTING MATERIAL	PROPOSED MATERIALS & COLOURS
EXTERIOR TREATMENT	white pine or cedar	white/clear pine and colors to match existing
ROOF	n/a	n/a
TRIM	white pine or cedar	white/clear pine and colors to match existing
DOORS	painting only	match existing colors
WINDOWS	white pine or cedar	white/clear pine and colors to match existing
PORCH/VERANDAH	n/a	n/a
FENCING	n/a	n/a
LANDSCAPING	n/a	n/a
INTERIOR FEATURES	n/a	n/a
OTHER	n/a	n/a

5. OTHER APPLICATIONS/PERMITS THAT MAY BE REQUIRED: (circle all that apply)

- BUILDING PERMIT PLANNING APPLICATION(S)
 TREE REMOVAL PERMIT SIGN PERMIT
 TREE DECLARATION FORM OTHER:

6. INFORMATION & PLANS REQUIRED FOR A COMPLETE HERITAGE PERMIT APPLICATION

Information/Plans typically required with a Heritage Permit Application are identified by Staff through the Pre-Consultation process. Please check off all required information as identified by Staff through Pre-consultation:

- Heritage Pre-Consultation Form
 Site Plan (Including buildings and structures on site and setbacks to property lines)
 Building Elevations (Including height of all existing and proposed structures)
 Recent photos of all building elevations (taken within 2 months of application submission)
 Proposed materials, Paint colours, Specifications for materials
 Floor Plans
 Cultural Heritage Evaluation Report/Heritage Impact Assessment
 Conservation Plan/Temporary Protection Plan
 Arborist Report/Tree Inventory
 Landscape Plans
 Other:

7. INFORMATION REQUIRED FOR A COMPLETE HERITAGE GRANT APPLICATION

TOTAL ELIGIBLE COSTS

44,771.50

ELIGIBLE INTERIOR WORK

ELIGIBLE EXTERIOR WORK

44,771.50

OTHER WORK (NOT ELIGIBLE)

TOTAL CONSTRUCTION COSTS

44,771.50

WORK COST AMOUNT FOR WHICH GRANT IS APPLIED:

(see Grant Program guide for maximum amounts)

\$7,500.00

CONSTRUCTION SCHEDULE (Construction of all works must be completed within one (1) year of construction start date, unless otherwise specified by Town Staff)

APPROX. START DATE OF CONSTRUCTION

APPROX. END DATE OF CONSTRUCTION

~~00000000~~ 2024-12-15

~~00000000~~ 2025-01-15

HAVE YOU APPLIED FOR OR WILL YOU BE OBTAINING ANY OTHER SOURCES OF GOVERNMENT FUNDING? (Includes federal, provincial, regional etc.)

- YES NO

If yes, please list other sources and amounts of government funding:

Others:

Amount: \$

8A. OWNER DECLARATION AND AUTHORIZATION FOR HERITAGE PERMIT APPLICATION

I hereby certify that I am the property owner or their authorized agent and that the above information is true to the best of my knowledge. I have reviewed the submission requirements and understand that incomplete applications may not be accepted.

I acknowledge that any change to the approved drawings, however small, may require an amendment to the permit and may require resubmission for approval. Failure to reveal these changes to Heritage Planning Staff may result in work stoppage and charges and/or fines under the Ontario Heritage Act.

I/We the Owner(s) of the subject property, and the applicant(s) of this subject application, by signing this application agree to allow either Town Staff and/or a Committee Member of the Niagara-on-the-Lake Municipal Heritage Committee the right to enter onto my property, as necessary, to view & photograph the property for the proposal. Failure to allow access onto the property may result in the application being considered incomplete.

The applicant acknowledges that the Municipality considers the application forms and all supporting materials including studies, drawings and photos, filed with any application to be public information and to form part of the public record. With the filing of an application, the applicant consents and hereby confirms that the consent of the authors of all supporting reports have been obtained, to permit the Municipality and Region to release the application and any supporting materials either for its own use in processing the application, or at the request of a third party, without further notification to, or permission from, the applicant.

OWNER NAME: *HNCC #93*
OWNER SIGNATURE: *[Signature]*
DATE: *October 18/24*
EMAIL ADDRESS***: *aprilh@shabriproperties.com*

***By providing an e-mail address you agree to receive communications and notices from the Town by email

8B. SWORN DECLARATION FOR HERITAGE GRANT APPLICATION

I/WE HEREBY APPLY for a grant under the Heritage Restoration and Improvement Grant Program.

I/WE HEREBY AGREE to abide by the terms and conditions of the grant program.

I/WE HEREBY AGREE to enter into a grant agreement.

I/WE HEREBY CERTIFY that the information contained in this application is true, correct and complete in every respect and agrees that the Town of Niagara-on-the-Lake reserves the right to verify any information contained herein by such inquiry as it deems appropriate, including inspection of the property for which this application is being made.

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

I/WE HEREBY AGREE that the grant may be reduced or cancelled if the work is not completed, not completed as approved or if the contractors are not paid.

I/WE HEREBY AGREE that the program for which application has been made herein is subject to cancelations and/or change at any time by the Town of Niagara-on-the-Lake in its sole discretion. subject to the terms and conditions specified! in the Program. All grants/ loans will be calculated and awarded at the sole discretion of the Town of Niagara-on-the-Lake. Notwithstanding any representation by or on behalf of the Town of Niagara-on-the-Lake, or any statement contain in the program, no, right to any grant arises until it has been duly

authorized and paid. The Town of Niagara-on-the-Lake 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.

I UNDERSTAND that all information requested on this form is collected under the authority of the Ontario Heritage Act, R.S.O. 1990, c. 0.18, as amended, and the provisions of the Municipal Freedom, of Information and Protection of Privacy Act, R.S.O. 1990, c. M.56. The information is required in order to process this application and forms part of the public record which may be published on the Town of Niagara-on-the-Lake website or by other means. The name and business address of the Registered Owner and/or Authorized Agent is public information.

Dated at the 18th, this day of October 2024
(Municipality) (Day/Month/Year)

APRIL HURST OLCM [Signature]
Name of Owner or Authorized Agent PROPERTY Signature of Owner or Authorized Agent
MANAGER

OFFICE USE
DATE OF NOTICE OF RECEIPT AS REQUIRED UNDER THE OHA: