



**Township of Warwick**

6332 Nauvoo Road  
R.R.#8  
Watford, ON, NOM 2S0  
Telephone: (519) 849-3926  
Fax: (519) 849-6136

**BROWNFIELDS ENVIRONMENTAL STUDY GRANT PROGRAM  
APPLICATION FORM**

Please indicate eligible grant applying for:

**Phase I ESA** \_\_\_\_\_

**PHASE II ESA** \_\_\_\_\_

**Applicant Information:**

**NAME OF REGISTERED PROPERTY OWNER:** \_\_\_\_\_

**MAILING ADDRESS OF REGISTERED PROPERTY OWNER:** \_\_\_\_\_

**POSTAL CODE:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**NAME OF BUSINESS:** \_\_\_\_\_

**NAME OF APPLICANT'S SOLICITOR:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **FAX:** \_\_\_\_\_

**E-MAIL:** \_\_\_\_\_

**Property Information:**

**ADDRESS OF SUBJECT PROPERTY:** \_\_\_\_\_

**LEGAL DESCRIPTION: LOT NO.** \_\_\_\_\_ **PLAN NO.** \_\_\_\_\_

**CURRENT ZONING DESIGNATION:** \_\_\_\_\_ **OFFICIAL PLAN DESIGNATION:** \_\_\_\_\_

**ASSESSMENT ROLL NUMBER:** \_\_\_\_\_

**EXISTING PROPERTY USE:** \_\_\_\_\_

**(ATTACH PLAN SHOWING EXISTING DEVELOPMENT AND LAND USES)**

**Other Sources of Funds:**

**HAS THIS PROPERTY RECEIVED GRANTS/LOANS OR OTHER FINANCIAL ASSISTANCE FROM ANY OTHER MUNICIPAL PROGRAM:** Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe the type of financial assistance and total amount of financial assistance:

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HAVE YOU APPLIED FOR OR WILL YOU BE OBTAINING ANY OTHER SOURCES OF GOVERNMENT FUNDING FOR REMEDIATION AND/OR REHABILITATION WORK? (Includes Federal, Provincial, Municipal, Federation of Canadian Municipalities, CMHC, etc...) Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe the type of financial assistance and total amount of financial assistance:

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IS THE PROPERTY IN TAX ARREARS? YES \_\_\_\_\_ NO \_\_\_\_\_

If yes specify value of Tax Arrears \$ \_\_\_\_\_

**Environmental Information:**

(Section to be completed by a Qualified Person as defined by the Environmental Protection Act and Ontario Regulation 153/04)

Please include and attach all supplementary details:

NAME OF QUALIFIED PERSON \_\_\_\_\_  
COMPANY \_\_\_\_\_  
MAILING ADDRESS \_\_\_\_\_  
TELEPHONE \_\_\_\_\_ E-MAIL \_\_\_\_\_

HAVE ANY OTHER ENVIRONMENTAL STUDIES BEEN PREVIOUSLY CONDUCTED ON PROPERTY

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please describe:

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HAS A PHASE 1 ENVIRONMENTAL SITE ASSESSMENT EVER BEEN CONDUCTED ON THE PROPERTY? YES \_\_\_\_\_ NO \_\_\_\_\_ (PLEASE ATTACH)

HAS A PHASE 2 ENVIRONMENTAL SITE ASSESSMENT EVER BEEN CONDUCTED ON THE PROPERTY? YES \_\_\_\_\_ NO \_\_\_\_\_ (PLEASE ATTACH)

DESCRIBE THE NATURE OF THE REMEDIATION/SITE RESTORATION WORK PROPOSED TO BE UNDERTAKEN:

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DESCRIBE ANY APPLICATIONS FOR DEVELOPMENT THAT ARE CURRENTLY UNDER REVIEW, OR ARE BEING PROPOSED FOR THE SUBJECT PROPERTY.

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**EXPLAIN HOW THE SITE AND/OR BULDING(S) MAY HAVE BECAME CONTAMINATED:**

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**PROVIDE A DETAILED COST ESTIMATE OF THE WORK (PHASE I OR II ESA EXCLUDING GST) TO BE UNDERTAKEN (PLEASE ATTACH THE ESTIMATE).**

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**I/WE HEREBY CERTIFY that the information given herein is true, correct, and complete in every respect and I/WE UNDERTAKE to provide all information as required by the municipality to determine the amount of grant available under this program.**

**SIGNATURE OF REGISTERED OWNER: \_\_\_\_\_ DATE: \_\_\_\_\_**  
**(Applicant)**

**SIGNATURE OF QUALIFIED PERSON: \_\_\_\_\_ DATE: \_\_\_\_\_**  
**(Environmental Consultant)**

**FOR OFFICE USE ONLY:**

**GRANT REFERENCE NUMBER: \_\_\_\_\_**

**DATE RECEIVED: \_\_\_\_\_**

**DATE APPROVED: \_\_\_\_\_**

**GRANT PAYMENT: \_\_\_\_\_**  
**(Grant payment will be made after taxes have been paid in full by the Owner)**