

## Septic Rehabilitation Program Pre-Application

Taxation and Revenue Department
City of Kawartha Lakes
P.O. Box 696, 26 Francis Street
Lindsay, Ontario K9V 4W9

Tel: (705) 324-9411 Ext. 1274, 1-888-822-2225

Fax: (705) 328-2620

Email: taxes@kawarthalakes.ca www.kawarthalakes.ca

Welcome to the City of Kawartha Lakes Septic Rehabilitation Loan Program (SRLP). The purpose of the *Pre-Application* is to provide pre-qualification for SRLP funding for you to make environmental improvements to your property. For fast pre-qualification, please complete the following form and submit it to the City. Further instruction on how to submit this application is found below.

#### What's Next?

Upon receipt of your **completed Application**, **staff will review your form to determine** your property's eligibility based on the following:

- Property type, location and verification of property ownership
- Status of your property tax and utility bill payments
- Mortgage lender consent (if applicable)

After successful completion of the review, if you qualify, the Program Manager will provide you with a Notice to Proceed letter that identifies:

- The maximum eligible funding amount for your project
- A SRLP file reference number for tracking your application as you proceed

#### How to submit the Pre-Application

Mail to:

Septic Rehabilitation Loan Program City of Kawartha Lakes Revenue and Taxation Division P.O. Box 9000, 26 Francis Street Lindsay, Ontario K9V 5R8

Or

Fax to: (705) 328-2620

Attn: Septic Rehabilitation Loan Program

\*Sending personal information by fax is not a secure means of transmission

## **A- Applicant Information**

## i. Applicant Primary Contact

The person to whom all communication (i.e. letters, e-mails), including any legal notices under the Property Owner Agreement with the City, will be directed.

Name of Primary Contact (First,Last) *		
Mailing Street Address *		
City *	Postal Code *	
Email *		
Phone Number *		
Relationship to Property *		
Owner		
Manager		
Tenant		
Other		
Preferred Method of Communication *		
Phone		
Email		
Mail		

# **A- Applicant Information**

#### ii. Legal Name(s) of Property Owner(s)

Please identify all property owners listed on the registered title for the property. All registered owners of the home must be identified in this section and consent to participate in SRLP.

Name of Property Owner 1 *	
Name of Property Owner 2	
Name of Property Owner 3	
R Proporty Information	
B - Property Information	
i. Property Identifying Information (the "Propert	ty")
Only Properties located within the boundary of the C pilot program, funding is limited.	City of Kawartha Lakes can participate in SRLP. This is a
Please identify the Property you are interested in ma	aking more energy and water efficient.
Property Street Address *	
City *	Postal Code *
Assesment Roll Number *	

ii. Property Type	
What best describes your Property (Select one)	
Full Detached	
Semi-Detached	
Cottage	
Other	
Commercial	
D - Mortgage Lender Consent	
Properties that are subject to a mortgage(s) will require all mortgage lenders prior to participating in SRLP. If you Consent Letter and Form will be provided to you by the with whom your mortgage(s) is registered for consideral Application and is incorporated into this Pre-Application	u have a mortgage, a <i>Lender Acknowledgement</i> & City. This form must be presented to the lender(s) tion. The completed form will form part of this <i>Pre-</i>
Is the Property subject to a mortgage?	If "yes", then list the lenders(s) holding these mortgages:
No	
Name of Lender 1 *	
Name of Lender 2	

**C** - Property Information

Note: Failure to obtain written consent from all mortgage lender(s) could result in the property owner breaching a mortgage obligation with the lender. The City is not responsible or liable for such an outcome.

# **E - Project Status**

Help us to better understand the status of your project (check all that apply)
Not sure what improvements to complete/Early stage of exploring options
Have already completed the Pre-Septic Rehabilitation Assessment that the City requires for the program
Have identified what contractor(s) will implement the improvements
Have developed a detailed scope of work for my project
Have identified the rebates and incentives that are applicable to my project (rebates that support Septic Rehabilitation improvements)
Have approached my mortgage lender to discuss participation in the Program
Have already obtained written mortgage lender consent for participation in the Program
Have secured the necessary financing to pay for my project
<ul> <li>F - Property Owner(s) Signature(s)</li> <li>I/We the undersigned Property Owner(s) hereby:</li> <li>Attest that all the information submitted as part of this application is truthful and accurate;</li> <li>Give permission to the person named as the Applicant Primary Contact in this application to engage with the SRLP Program Manager and/or other City staff on our behalf;</li> <li>Have read and understand the SRLP Program Requirements and consent to the participation of the Property in the Program; and</li> <li>Understand and agree that any funding received under SRLP will be repaid to the City by payment of a special charge added to the Property's tax account by the City.</li> </ul>
Property Owner 1 Name (Printed) Property Owner 1 Signature
Date (mm/dd/yyyy)

Property Owner 2 Name (Printed)	Property Owner 2 Signature
Property Owner 3 Name (Printed)	Peoperty Owner 3 Signature

Personal information contained on this form is collected pursuant to the Municipal Act, 2001 and will be used for the purpose of responding to your request. Questions about the collection of this information should be directed to the City Clerk or Deputy-Clerk at 705-324-9411 extension 1295 or 1322.