



Collingwood Housing Incentive Pilot Program (CHIPP) Stream 3 Application Form

**Town of Collingwood
Planning Services**

Phone: 705-445-1030

Email: chipp@collingwood.ca

1. Applicant Information:

First Name: _____ Last Name: _____

Organization Name _____

Street #: _____ Street Name: _____ Unit #: _____

Mailing Address (if different): _____

Town/City: _____ Province: _____ Postal Code: _____

Country: _____ Primary Phone #: _____

Email: _____ Alternate Phone #: _____

Are you applying on behalf of multiple organizations as the lead? Yes No

If yes, what other organization(s) are you collaborating with?

2. Lead Organization Details

- Non-Profit Organization
- Housing Corporation (Government owned)
- Community Land Trust
- Housing Cooperative

4. Supporting Documentation

Please include the following materials:

- Completed Project Information Spreadsheet
- Project Pitch details, including:
 - Overview of proposed project
 - Number of housing units being created
 - Number of affordable housing units being offered
 - Type and nature of uses proposed (i.e., residential, commercial, institutional, mixed use)
 - Indicate if the project includes any low-impact, sustainable development features
 - Indicate whether the project makes strong efforts toward neighbourhood compatibility
 - Consideration for accessible or barrier free design
 - Indicate the mix of housing unit sizes and types
 - Outline any proposed community benefits included in the project
 - Development approval requirements
- Site or concept plan for the proposed development
- Any additional supporting documents that you think would be helpful in the evaluation of your application

5. Applicant Attestation

We, the undersigned, declare that all information provided in and with this statement is factual and correct and that we have authority to sign on behalf of our organization.

Print Name

Print name

Signature

Signature

Title

Title

Date

Date

We, the undersigned, acknowledge that this application does not represent a formal procurement process of the Town.

Print Name

Print name

Signature

Signature

Title

Title

Date

Date

Personal information is collected under the authority of the Municipal Act, 2001 Section 398 (2) for the purposes of selection of applications for grants. Questions about the collection of personal information, use, and disclosure should be directed to the Clerk Services, Town of Collingwood, email: clerk@collingwood.ca or 705-445-1030.