



PER - 3008

Department of Planning, Engineering and Regulatory Services

### Heritage Financial Incentives Program

(Please Print)

#### PROPERTY LOCATION

#### SECTION 1

Civic Address \_\_\_\_\_ Name of Property (if applicable) \_\_\_\_\_

Applicant Name \_\_\_\_\_ Phone (h) \_\_\_\_\_ (c) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

#### PROPERTY OWNER (if different than applicant)

#### SECTION 2

Name of Property Owner \_\_\_\_\_ Phone (h) \_\_\_\_\_ (c) \_\_\_\_\_

Mailing Address \_\_\_\_\_ Email \_\_\_\_\_

#### WORK DETAILS

#### SECTION 3

Describe the proposed work and associated costs in maintaining property in a Heritage Building/Area (use extra pages if necessary) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Estimated Cost of Work (excluding HST) \_\_\_\_\_ Type of Grant Requested \_\_\_\_\_

#### QUOTES (2 required)

#### SECTION 4

- Name \_\_\_\_\_ Phone (h) \_\_\_\_\_ Estimate \_\_\_\_\_  
Mailing Address \_\_\_\_\_
- Name \_\_\_\_\_ Phone (h) \_\_\_\_\_ Estimate \_\_\_\_\_  
Mailing Address \_\_\_\_\_

#### SIGNATURE

#### SECTION 5

I hereby request that the permit fees be waived: Yes \_\_\_\_\_ No \_\_\_\_\_

Applicant Signature \_\_\_\_\_ Date (yyyy-mm-dd) \_\_\_\_\_

Property Owner Signature \_\_\_\_\_ Date (yyyy-mm-dd) \_\_\_\_\_

Please mail completed form to:

Urban Design and Heritage Planner  
 Planning, Engineering and Regulatory Services  
 John J. Murphy Building, City Hall Annex  
 10 New Gower Street  
 P.O. Box 908  
 St. John's NL A1C 5M2

Call: 576-8220  
 Fax: 709-576-8625  
 Email: [planning@stjohns.ca](mailto:planning@stjohns.ca)  
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