

# Private Road Grant Assistance - **PREVIEW** Capital Improvements

The objective of this program is to improve access for emergency vehicles on existing private roads.

The [Private Road Standard](#) outlines the anticipated requirement for private roads.

Funding assistance is not retroactive and applies only to applications received for work completed in the year for which it is intended.

Please read the following to ensure you have the information necessary to complete this form.

- [Private Road Grant Policy and Application](#)

Due date for the application is the first Friday in June. Late applications will not be accepted.

## Part I - Private Road Information

**Name of Road Association \***

**Name of Private Road / Lane \***

**Please list names of all roads/lanes that are included in your membership. \***

**Location (Closest Intersecting Roads)**

**Number of Seasonal Households \***

**Number of Year Round Households \***

## Part II - Association Information

**President's Name \***

**President's Mailing Address**

**President's Phone Number**

**President's Email Address**

**Treasurer's Name**

**Treasurer's Mailing Address \***

**Treasurer's Phone Number \***

**Treasurer's Email Address \***

**Secretary's Name**

**Secretary's Mailing Address**

**Secretary's Phone Number**

**Secretary's Email Address**

**If approved, who will be receiving payment on behalf of the Association?**

- President
- Treasurer
- Secretary

**If approved, grant funds will be issued by Electronic Funds Transfer (EFT). Please indicate if bank account can receive EFT payments.**

- Yes
- No

**PREVIEW**

### Part III - Applicant Information

**Name of Individual Submitting Application \***

**Mailing Address of Individual Submitting Application \***

**Phone Number \***

**Applicant's Email Address \***

**Name of Individual who is Accountable for Authorizing Work \***

**Email Address of Individual who is Accountable for Authorizing Work \***

**PREVIEW**

## Part IV - Existing Conditions of Proposed Work Zone

Refer to the [Private Road Grant Policy](#) to review Private Road Standard.

**Length of Road Segment (KM) \***

**Surface Width (M) \***

**Maximum Grade (%)**

**Width of Clearing (M)**

**Flooded Areas? \***

Yes

No

**Sharp Bends in Road? \***

Yes

No

## Part V - Checklist

Applications must include items marked with an \*

**Please upload a detailed description of the proposed work with cost estimates. Proposed work must comply with the Grant Policy. \***

**3.5.1 Upload a copy of the Association's bank statement \***

**3.5.2 Upload Meeting Minutes from the previous year \***

**3.5.3 Upload a complete, balanced and approved budget for the year of the application. Include estimated revenue from the Township. \***

**3.5.4 Please upload a summary of work completed in the previous year that was funded by the Township grant (include receipts) \***

**3.5.5 Please upload a statement of anticipated revenue and expenditures for current year. \***

**Please upload Association Membership List. Must include full name and Township address of each member including elected officers. \***

Upload photos, if applicable

Upload additional documents, if applicable

**PREVIEW**

## Part VI - Authorization

I certify that the information provided in this application is true, correct and complete to the best of my knowledge and that the Municipality may verify any and all information pertaining to this application.

I certify that I have read the private road grant policy and that the road association meets the conditions for eligibility.

I agree to notify the Township of the Leeds and the Thousand Islands of any changes that may affect eligibility for the Private Road Grant.

I acknowledge that the application for the Private Road Grant Program must be made on an annual basis.

Before submitting this application (the "application"), I agree as follows:

1. I am 19 years of age or older, and am legally authorized and have all the required approvals necessary to make this application.
2. This application will be received and reviewed by Township staff and submitting this application does not mean that it will be accepted.
3. I freely accept and fully assume all risks, dangers and hazards associated with the application; and that I acknowledge my responsibility to properly insure and protect myself against risks associated with the application;
4. I waive all claims arising from this Application that I have or may have in the future against the Township, its elected officials, officers, employees, volunteers and representatives associated with the Application (hereinafter collectively referred to as the "Releasees");
5. I waive all claims arising from this application that I have or may have in the future against the Township, its elected officials, officers, employees, games officials, volunteers and representatives associated with my participation in the activity (hereinafter collectively referred to as the "releasees");
6. I release the releasees from any and all liability for death or any loss, damage, injury or expense that I may suffer, or that my next of kin may suffer arising from this application or due to any cause whatsoever;
7. I indemnify the releasees from any and all liability for any businesses losses damage to property of or personal injury to, any third party, arising from my application including the rejection of this application;
8. I agree that this agreement is binding upon my heirs, next of kin executors, administrators, assigns and representatives in the event of my death or incapacity; that I have read this agreement and I understand its content; and that by signing it I am waiving certain legal rights which I or my heirs, next of kin, executors, administrators and assigns may have against the releasees.

By inserting my name below, the date, and clicking "continue" I declare that I have understood the risks associated with the application and that I am giving up my right to sue the Township for damages if I am injured or suffer financial losses as a result of this application.

**Signature of Applicant \***

**Date \***

# Thank You

PREVIEW

Your application has been received.

The private road will be inspected to confirm existing conditions as indicated.

Applications will be prioritized based upon the number and severity of deficiencies as well as the number of residents served.

Final inspection will be undertaken upon notification of completion of work. Receipts for completed work must be submitted by the first Friday in November.

A copy of this application will be emailed to you by staff within 3 business days.