

APPLICATION FOR LOAN

TO: The Council of _____ of _____

DETAILS OF OWNERSHIP

Owner's name	Telephone
Address	Postal Code

DESCRIPTION OF LAND TO BE DRAINED

Lot number	Concession number
If portion of lot, specify:	

DESCRIPTION OF DRAINAGE SYSTEM

Number of hectares to be drained	Approximate number of metres of material

ESTIMATED COST OF DRAINAGE SYSTEM

AMOUNT OF LOAN REQUESTED

Material	\$	(Amount of loan requested must be a multiple of \$100, not exceeding 75% of the total cost)
Other		
Inspection fees		
TOTAL COST	\$	
		\$

Anticipated date of commencement	Anticipated date of completion
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In making this application for a loan, I understand and agree to the following:

- (a) the granting or refusal of the application is in the discretion of Council whose decision is final;
- (b) I will be advised in writing of Council's decision regarding the application;
- (c) should the application be granted, an inspector of drainage appointed by Council will report to Council to the effect that the work has been satisfactorily completed before any funds are advanced by way of loan;
- (d) it is also a condition of the making of the loan that all work must be carried out in accordance with the *Agricultural Tile Drainage Installation Act*;
- (e) Council shall levy and collect for the term of ten years over and above all other rates upon the land, in respect of which the loan is made, a special equal annual rate sufficient to discharge the principal and interest of the loan;
- (f) the *Tile Drainage Act* sets out procedural matters concerning apportionment of a loan when part of the land is sold, discharge of the indebtedness upon repayment of the loan at any time and all other matters which pertain to this application for a loan; and

I hereby certify that I have not applied for or received as an owner of _____ or a person or corporation beneficially entitled to any interest in land or leasehold any loan or loans in this or any other municipality in excess of a total of \$ _____ in this year, and I hereby certify that my outstanding balance is not greater than \$ _____

_____	_____
Date	Signature of owner
_____	_____
Date	Signature of owner

Personal information contained on this form, collected pursuant to the *Tile Drainage Act* will be used for the purposes of that Act. Questions should be directed to the Freedom of Information and Privacy Coordinator at the institution conducting the procedures under that Act.