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## Development Application Fee Sponsorship Application Form

*Under Islands Trust Policy 4.1.xiii, Trust Council Executive Committee may sponsor development application fees. When applying for sponsorship, please submit this form, or the details in a letter, **with your development application**. Applicants are encouraged to file this form with or after their development application.*

### To be eligible for Executive Committee Sponsorship:

- ✓ The applicant is a non-profit agency or organization seeking to establish, expand or modify a facility for the benefit of the community at large and consistent with goals in the Official Community Plan (OCP).
- ✓ The applicant is an established or establishing institution supported by taxpayers that is seeking to establish, expand or modify a community facility. (Potential sponsorship of up to one half of the costs of the application)
- ✓ The applicant seeks to implement specific objectives of an OCP with broad community benefits.

### The following are NOT eligible for Executive Committee Sponsorship:

- ✗ The applicant is a registered for-profit corporation under the Corporations Act.
- ✗ The applicant is a non-profit agency or organization seeking to establish, expand or modify a facility that would not benefit the community at large.
- ✗ An applicant claims that he or she cannot afford the cost of the application, and the application would not otherwise qualify for sponsorship or initiation.
- ✗ ALR and Subdivision referral application fees are not eligible.

### SECTION 1: APPLICANT INFORMATION

(Please print or type all sections)

Organization Name: \_\_\_\_\_

Primary Contact: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Charitable Status Number (If applicable): \_\_\_\_\_

Organization Mandate (Attach bylaws, constitution or cite organization website): \_\_\_\_\_

Board Members (Name, Position): \_\_\_\_\_

**SECTION 2: DEVELOPMENT APPLICATION INFORMATION**

**Check development application where fee refund is requested:**

- |  |  |
|--|--|
| <input type="checkbox"/> Official Community Plan | <input type="checkbox"/> Development Variance Permit |
| <input type="checkbox"/> Zoning Bylaw Amendment  | <input type="checkbox"/> Temporary Use Permit        |
| <input type="checkbox"/> Development Permit      | <input type="checkbox"/> Other: _____                |

Development Application Submitted?  Yes  No      Application #: \_\_\_\_\_

Development Application Fees Paid (Amount): \_\_\_\_\_ Receipt #: \_\_\_\_\_

**SECTION 3**

Objective of Development Application: \_\_\_\_\_

Describe how the Development Application furthers official community plan goals: \_\_\_\_\_

**SECTION 4**

I/we declare that all of the above statements and the information contained in the material submitted in support of the application are to the best of my/our knowledge true and correct.

Printed Name: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Information (e-mail and/or phone): \_\_\_\_\_

**INFORMATION TO BE COMPLETED BY ISLANDS TRUST**

Date of Executive Committee Consideration: \_\_\_\_\_ Decision: \_\_\_\_\_

Financial Details: \_\_\_\_\_

Fee Refunded: \_\_\_\_\_

Organization Charitable Status Number: \_\_\_\_\_

LTC Notified (Date): \_\_\_\_\_

Applicant Notified (Date): \_\_\_\_\_