



## BUSINESS RETENTION AND ATTRACTION INCENTIVE PROGRAM

### 1. APPLICANT INFORMATION

Business Name: 318925 AB Ltd & 1805182 AB Ltd

Applicant Name: Cold Lake EyeCare - Ross Campbell & John Barkley

Property Address: 5102 - 55 Street Lot: 1 Block: 25 Plan: 4969HW

Mailing Address: 5102 - 55 Street, Cold Lake, AB Postal Code: T9M 1R1

Business Phone: 780 594-5755 Cell: 780 573-3484/780 201-6979 Home: 780 639-3012

### 2. TYPE OF IMPROVEMENT(S)

a) Check all categories that apply and provide a brief description of the project (attach a separate sheet if necessary):

☐ Internal/External Enhancements to Existing Building (Section 4.8): \_\_\_\_\_

☐ Demolition of Existing Buildings (Section 4.9): \_\_\_\_\_

☒ New Build on Vacant Land (Section 4.10): A 7400 sq ft building, including totally finished interior to accommodate an optometric practice with a 2500 sq ft frame room and 7 exam lanes with administrative offices upstairs

☐ Addition to Existing Building (Section 4.10): \_\_\_\_\_

b) What is the estimated value of the work you will be undertaking? (Section 4.4.1) \$ 3,000,000.00

### 3. DECLARATION

I, (print name) Ross Campbell & John Barkley, hereby request the City of Cold Lake to administer the Business Retention and Attraction Incentive Program in regard to the above designated improvement(s) on my behalf. I am aware that such improvement(s) shall be subject to assessment verification and applying under this program requires acceptance that will coincide with the issuance of all permits necessary for the project to be undertaken. Determination of increase in assessed value resulting from improvements shall be determined by the City's Assessment Agency. I further acknowledge that I have read and understand the policy and the terms and conditions upon which my application will be reviewed and any approved funding shall be disbursed.

Applicant Signature: \_\_\_\_\_

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

*Ross Campbell*

*January 30, 2019*