

Grant Application 2023

Fill out section A.

A – Applicant	Tenant 🗖	Owner \Box	Other Expla	Other 🖵 Explanation:		
1. APPLICANT I	DENTIFICAT	ION				
			Date of b	oirth:	_	_
First and last name in block letters				year	month	day
Phone number: (<u>()</u>					
2. IDENTIFICAT	ION OF THE	ELIGIBLE RE	SIDENCE ON M	AY 1, 202	23	
Civic No.	No. Street				Apartment	
Municipality:	Point	e-Claire	Postal code:			
I declare being	a resident of	the City of P	ointe-Claire on N	May 1, 20	23.	
			Date:			
Applicant signature				year	month	day
B – Landlord's s		ne residence if t	he applicant is not t	he owner.		
			tenant on May 1, 2			
First and last name in block letters			(
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			Date : _		·	
Signature				vear	month	dav