

ARCHAEOLOGY GRANT APPLICATION

SECTION 1: APPLICANT & PROPERTY INFORMATION

APPLICANT NAME				FOR OFFICE USE ONLY ROLL NUMBER	
MAILING ADDRESS			CITY, PROVINCE		POSTAL CODE
PHONE NUMBER	CELL NUMBER		EMAIL		
PROPERTY ADDRESS			CITY, PROVINCE		POSTAL CODE
I confirm that I owned this pro					
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ARCHAEOLOGIST NAME			EMAIL		
TOTAL PAYMENT REQUESTED (UP TO \$20,000 MAXIMUM PER PROP			L PERTY)	☐ Village to pay archaeologist directly ☐ Village to reimburse applicant for payment	
☐ I confirm that I have included SECTION 3: PAYMENT DET ☐ I confirm that the costs of arch ☐ I understand that the Village of responsible for paying the remain ☐ I have paid the archaeologist maximum via electronic funds tra	AILS naeology related for Lytton will hing balance directly, and	ated to my property ha make a payment of up , OR I understand that the	ve NOT been reimbur to \$20,000 maximum Corporation of the Villa	sed under so directly to the age of Lyttor	ome other program ne archaeologist, and I am n will reimburse me up to \$20,000
SECTION 4: SIGNATURE					
I hereby certify that the information	on provided	in this application is tru	ie, accurate, and com	plete to the b	pest of my knowledge.
PRINT OR TYPE NAME		SIGNATURE		DATE	
FOR OFFICE USE ONLY					
APPLICATION REVIEWED			PAYMENT ISSUED		
☐ CONFIRMED PROPERTY OWNER ON JUNE 30, 2021	CONFIRMED BY		AMOUNT		BATCH NO.
REVIEWED BY			ISSUED BY		
DATE			DATE		

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