

SECURITY AND/OR VANDALISM GRANT APPLICATION FORM

Funding is available for businesses and property owners who wish to set up security cameras, upgrade lock quality, install anti-shatter window films, or otherwise upgrade security and/or expedite repairs to businesses' windows, doors, locks, and physical properties due to vandalism or break-in damage.

The DVBA will provide these funds on a first-come, first-served basis from January 1st 2022 until our allocated budget is exhausted. We will provide 50% of the cost of security upgrades to a maximum of \$1000 per business. In cases of vandalism, we will provide 100% of the cost of repairs to a maximum of \$1000 per business, and claims must take place between January 1st and December 31st.

Name of Business: _____

Physical Address (including postal code): _____

Name to appear on cheque: _____

Mailing Address (if different than above): _____

Preferred means of contact: _____

My business would like to:

- | | |
|--|--|
| <input type="checkbox"/> purchase and set up security cameras* | <input type="checkbox"/> install a security gate |
| <input type="checkbox"/> apply anti-shatter window film | <input type="checkbox"/> repair physical damage due to vandalism |
| <input type="checkbox"/> improve the building locks | <input type="checkbox"/> Other: _____ |

If repairs are needed, please provide the date and time of the incident: _____

Victoria Police Department File number: _____

In cases of vandalism, will your insurance provide coverage for this expense?: yes no

If yes, how much of this expense will you recover through your insurer?: _____

If no, please explain why it will not be covered: _____

We will provide funding once the work is done and upon receiving copies/scans of the project receipts. If you are seeking reimbursement for repair work, please provide proof of insurance deductible amount as well as the receipts for the completed work.

Privacy agreement: *The DVBA is providing this funding under an agreement with the City of Victoria, so this program is subject to the requirements of FOIPPA. We will not disclose your information to any third party and will act to keep it secure, however, we will share it with authorized City staff as needed and requested.*

Signature of Applicant: _____ Date: _____

Approved by: _____ Date: _____

Jeff Bray, DVBA CEO