



APPLICATION FORM

CLOTH DIAPERS FOR BABIES / GRANT PROGRAM

Name: _____ First name: _____

Address: _____ Postal Code: _____

Telephone (home): _____ Telephone (other): _____

Email: _____

ELIGIBILITY CONDITIONS

- Be a Town of Pincourt resident;
- The rainwater recovery barrel was purchased, as a priority, from a business located in Pincourt.

SUPPORTING DOCUMENTS TO INCLUDE WITH THE APPLICATION

- Application form signed by the owner
- Proof of residence (driver's license, public utility bill, etc.)
- Product identification, including specifications
- Original invoice for the purchase of the new rainwater recovery barrel

Submit the application form and supporting documents to:

Town Hall Town of Pincourt
919, chemin Duhamel, Pincourt (Québec) J7W 4G8

Or by email at

c.masse@villepincourt.qc.ca

COMMITMENT

I, _____ (in block letters), agree to abide by the terms and conditions of the grant program related to this application. I authorize the Town to visit the premises to verify the accuracy of the application. I certify that the requested grant is for a residence located in the Town of Pincourt.

Signature : _____ Date : _____