

A. General Program Eligibility

This application form is intended for eligible small businesses, small farms, and not-for profit organizations located in the impacted area to apply for support through the Business Ice Storm Assistance (BISA) program, for eligible costs related to the ice storm that began on March 28, 2025.

Deadline for Applications: October 31, 2025

B. Instructions

1. Check if you are eligible by reading the [program guidelines](#).
2. Complete the application in full (ensure you complete Section C. "Declaration" below)
3. Complete the document checklist on the last page of this form.
4. Submit your application form and supporting documents by email to: DisasterAssistance@Ontario.ca or regular mail to: **Business Ice Storm Assistance, PO Box 73038, Wood Street Post Office, Toronto ON M4Y 1X4.**
5. If you have questions e-mail DisasterAssistance@Ontario.ca.

Fields marked with an asterisk (*) are mandatory.

C. Declaration of Applicant*

Last Name	First Name	Date (yyyy/mm/dd)
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☐ I have read the statement below and wish to continue with this application.

By checking this box, typing or signing my name above and submitting this application form, I declare that all information I am providing, is to the best of my knowledge, true and accurate. I authorize the Ministry of Municipal Affairs and Housing (Ministry) to collect information, including personal information, from any third party for the purpose of processing this application and administering the Business Ice Storm Assistance program. I authorize any third party, including my insurance provider, to share relevant information with the Ministry and the Ministry program administrators. I declare that I am not requesting assistance for expenses paid for by another organization or source (excluding my insurance provider). I have the requisite authority to apply for the small business or farm (as the owner or agent authorized by the owner of the small business or farm), or for the not-for-profit organization, as the case may be.

I acknowledge that all applications are subject to audit and agree to retain original documentation for seven years from the date of this application for this purpose. If any part of this application, or documentation submitted as part of this application, is found to be false, or based on false or misleading information, the Ministry may immediately close the file, may demand immediate repayment of any funds paid from the Applicant and may take any actions to recover funds from the Applicant, including initiating legal proceedings.

Personal information contained in or required by this application is collected by the Ministry of Municipal Affairs and Housing under the authority of Business Ice Storm Assistance program. The information is collected and used for the purposes of evaluating eligibility for and administering the Business Ice Storm Assistance program, including: (1) processing applications/claims, (2) assessing eligibility for assistance, (3) verifying information provided under the program, (4) processing payments, and (5) performing audits. In addition, the information may be used to recover payments made under the program where the Ministry determines that such payments were unauthorized. Inquiries about the collection of information can be directed to the Senior Information Management and Privacy Advisor, Ministry of Municipal Affairs and Housing, 17th Floor, 777 Bay Street, Toronto ON M5G 2E5.

D. Applicant Information

Type of application. Check **one** box per application*

☐ Small Business ☐ Small Farm ☐ Not-For-Profit Organization

Contact Information

Legal Name of Business, Farm, or Not-for-Profit Organization

Last Name *

First Name *

Position Title

What is your preference for receiving correspondence?

☐ E-mail ☐ Mail

Mailing Address

Unit Number

Street Number *

Street Name *

PO Box

City/Town *

Province *

Postal Code *

Primary Telephone Number *

Alternative Telephone Number

Email Address

Damaged Property Address (if different from mailing address above)

Unit Number

Street Number

Street Name

PO Box

City/Town

Province
ON

Postal Code

Event Details

What date(s) was the damaged property impacted by the ice storm?

Describe the damage caused by the ice storm.

E. General Eligibility Criteria

Complete the section that corresponds to your application type.

Refer to the program guidelines for a list of required documents to include with your application.

Section 1 – Small Business Applications

Are you the day-to-day manager and/or operator of the business?

☐ Yes ☐ No

Is the business your primary source of income?

☐ Yes ☐ No

Do you own more than 50 per cent of the business?

☐ Yes ☐ No

Does the business have between \$10,000 and \$2,000,000 in gross revenues per year?

☐ Yes ☐ No

Does the business have the equivalent of 20 full-time employees or fewer?

☐ Yes ☐ No

CRA Business Number

Section 2 – Not-For-Profit Organization Applications

Does the organization provide a service to the broader community and allow public access to its facilities?

☐ Yes ☐ No

Describe the service provided by your organization.

Does the organization use all of the net revenue generated (if any) to carry out its goals and objectives?

☐ Yes ☐ No

Business Number or Charitable Registration Number

Section 3 – Small Farm Applications

Are you the day-to-day manager and/or operator of the farm?

☐ Yes ☐ No

Is the farm your primary source of income?

☐ Yes ☐ No

Do you own more than 50 per cent of the farm?

☐ Yes ☐ No

Does the farm have between \$10,000 and \$2,000,000 in gross revenues per year?

☐ Yes ☐ No

Does the farm have the equivalent of 20 full-time employees or fewer?

☐ Yes ☐ No

Farm Business Registration Number

F. Insurance

You must submit a claim to your insurer before submitting an application to this program.

Note: Insurance coverage (including insurance deductibles and payments) is subtracted from eligible costs.

Is the damaged property and/or its contents covered by an insurance policy? *

☐ Yes ☐ No

Note: by checking "No", you are declaring that the damaged property is not covered by any insurance policy including basic coverage. By completing the declaration in Section C you authorize your insurance provider to share relevant information with the Ministry and the Ministry program administrators.

If 'Yes', what action was taken by your insurance company? (e.g. amount paid, claim denied, or field adjuster sent)

Insurance Policy Number

Name of Insurance Company

Name of Insurance Broker/Agent

Telephone Number

Date Broker/Agent was Notified
(yyyy/mm/dd)

Do you have a copy of an insurance adjuster's report or any other documentation to confirm your claim from your insurer?

☐ Yes (if yes, please include) ☐ No

You must include any correspondence between you and your insurer detailing the type and cause of damage or loss, the amount of the insurance deductible, the amount paid, the reason any portion of the damage or loss was not covered, and the name and contact information of your insurer.

G. Expenses

Use this table to list emergency evacuation costs, cleanup costs, essential repair costs, and essential items that you need to replace. Refer to the program guidelines to determine which costs are eligible under the program.

Note: Expenses must be supported by proof of payment such as a receipt or paid invoice. Indicate the document type and include the company or store name. Number the documents that you are including in your submission (see examples below).

Date (yyyy/mm/dd)	Description of Expense	Description of Documentation	Document Reference Number	Amount (\$)
Example 2025/03/29	Generator rental during power outage (March 29-April 3, 2025)	Invoice and cheque from Ontario Equipment Rental Company	#1 & #2	\$4,000.75
Example 2025/04/02	Removed tree debris and disposed waste	Invoice from Arbor Andy's Ltd. and bank statement showing withdrawal	#3 & #4	\$10,195.16
Example 2025/05/04	Repair of uninsured shed damaged by fallen trees	Receipt for lumber materials from Hardware Heaven to rebuild shed, photo of damaged shed	#5 & #6	\$2,725.50
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H. Legal Proceeding(s)

Have you initiated, or do you plan to initiate, or are you party to a legal proceeding to recover losses related to the ice storm referred to in this application?

☐ Yes ☐ No

Note: If yes, any assistance may be withheld pending the outcome of the legal proceeding(s).

I. Other Forms of Assistance

Did you receive financial recovery assistance from any other organization/source related to the ice storm?

☐ Yes ☐ No

If yes, specify:

Name of Organization/Source	Amount (\$)

What did you use the assistance for? (e.g. drinking water or food for volunteers)

Note: You cannot receive assistance for the same expense twice. By completing the declaration in Section C of this application form, you confirm that you are not claiming reimbursement for items covered by any other forms of assistance.

All applicants are required to complete the Declaration in Section C of this application form. If you do not complete the Declaration or do not submit required documentation listed below, the review of your application could be delayed or closed with no payment. Please keep a copy of your application package for future reference.

Documents List

For All Applicants

- ☐ 1. **Business Ice Storm Assistance: Application Form for Small Businesses, Small Farms and Not-For-Profit Organizations** with all relevant sections completed.
Note: Ensure you complete the "Declaration" on the first page (Section C) of the application form.
- ☐ 2. **Correspondence between you and your insurance company** that details the type and cause of damage, the amount of the insurance deductible, the amount covered or the reason any portion of the loss was not covered, and the name and contact information of your insurer. Any relevant damage reports from your insurance provider should also be submitted. If you do not have insurance, you should indicate this on page 4 of this form.
- ☐ 3. **If applying for structural expenses, proof of property ownership or proof of legal responsibility for repair of damaged assets** (e.g. lease agreement).
- ☐ 4. **Receipts or invoices** for costs incurred and **estimates or quotes** for costs not yet incurred.
Photos or other evidence to prove that items you are applying for were damaged in the ice storm are also required.

For Small Business Owners Only

- ☐ 5. **Proof of business ownership**, showing that you own at least 50 per cent of the business.
- ☐ 6. **A copy of your T1 General Income Tax and Benefits Return/T2 Corporation Income Tax Return, and associated Notices of Assessment** for the most recent tax year. To demonstrate that the business is not a hobby business, you must show that you depend on the business for your livelihood and the business provides at least 15% of your net income (an exception may be made if the business has at least one employee outside your household).
- ☐ 7. **A copy of the business's financial statements** for the most recent fiscal year.
- ☐ 8. Document showing your CRA **Business Number**, if applicable.

For Not-For-Profit Organizations Only

- ☐ 9. **Copy of incorporating document** (e.g., Articles of Incorporation or Letters Patent).
- ☐ 10. Document showing your Business Number or **Charitable Registration Number**.

For Small, Owner Operated Farms Only

- ☐ 11. **Proof of farm ownership**, showing that you own at least 50 per cent of the farm.
- ☐ 12. **A copy of your T1 General Income Tax and Benefits Return/T2 Corporation Income Tax Return, and associated Notices of Assessment** for the most recent tax year. To demonstrate that the business is not a hobby business, you must show that you depend on the business for your livelihood and the business provides at least 15% of your net income (an exception may be made if the business has at least one employee outside your household).
- ☐ 13. Document showing your **Farm Business Registration Number**.