

Capital Project Grant Application

Applicant Information

| | |
|--|----------------------|
| ORGANIZATION NAME: | DATE: |
| MAILING ADDRESS: | POSTAL CODE: |
| HAMLET/TOWN: | PROVINCE: |
| PRIMARY CONTACT NAME(S): | PHONE/FAX NUMBER(S): |
| EMAIL(S): | |
| NAME & LOCATION OF FACILITY (IF APPLICABLE): | |
| VISION/MISSION STATEMENT: | |

Agreement

1. The grant shall be used only for those purposes as outlined in the Capital Project section of the Big Lakes County Grant Funding Policy. Grant funds not expended for the purposes for which they were provided shall be returned to Big Lakes County.
2. In order to be eligible for Capital Project Funds, the Community Organization shall be a registered society, in good standing, with the Province of Alberta, or have charitable status with the Government of Canada.
3. Applications for Capital Project Grant Funding must be submitted before a project begins. The County will not approve retroactive project funding, unless there is proof of emergent need (as defined in the Big Lakes County Grant Policy).
4. Grant funding will be based on estimated project costs and volunteer contributions, so please provide written estimates/quotes for all costs included in the project budget. Quotes/estimates for equipment, materials, and labour, must be from local suppliers and contractors as is possible. When local estimates cannot be provided, this must be indicated in the application.
5. The Capital Project Grant application deadline is October 31 of the year prior to the anticipated project start. In order to be presented to Council for consideration during annual budgetary deliberations, applications must be submitted in full prior to the deadline.
6. Grants are approved as matching grants of up to 50% of the estimated project cost, but funding is paid as reimbursement for completed projects. Grant recipients will be required to provide proof of paid invoices and receipts for actual project costs after project completion. Goods and Services Tax (GST) is not an allowable expense. Please omit GST from your application and eventual Claim Form.
7. Big Lakes County will not fund equipment or capital projects that benefit individuals or family groups rather than the overall public



- 8. Due to limited funds and high demand for Big Lakes County funding, not all requests that meet the established criteria will be approved for funding. Applicants may be approved for full, reduced, or no funding for their projects.
- 9. Declaration of Financial Contact: the person responsible for finances must complete the following:

I _____ , _____
 (PRINT NAME) (PRINT OFFICIAL POSITION)

Solemnly declare to take full responsibility for receiving and facilitating disbursement of monies received from the County, in response to this application, of which this statement forms a part.

Declared on this day/month/year: _____

SIGNED: _____

WITNESSED: _____

Project Outline

PROJECT TITLE: _____

COUNTY FUNDING REQUESTED \$: _____

IS THIS PROJECT PLANNED IN PHASES OR AS ONE COMPLETE PROJECT?

PROJECT SCHEDULE: START DATE: _____ PROPOSED END DATE: _____

PROJECT DESCRIPTION: (PLEASE ATTACH ADDITIONAL PAGES AS NEEDED)

Project Budget

1. **EXPENDITURES** (Please attach estimates or quotes)

a) PLANNING (consultants, drawings, studies)

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |
| _____ | \$ _____ |

b) GOODS & SERVICES (materials/equipment/labour)

| | |
|-------|----------|
| _____ | \$ _____ |
| _____ | \$ _____ |

\$ _____

\$ _____

\$ _____

c) VOLUNTEER LABOUR
Volunteer Labour @ \$20/hour (unskilled) \$ _____
Volunteer Labour @35/hour (skilled) \$ _____
Volunteer Labour & Equipment @ \$70/hour \$ _____

d) DONATED GOODS & SERVICES

\$ _____

\$ _____

\$ _____

\$ _____

\$ _____

TOTAL EXPENDITURES \$ _____

2) REVENUES SOURCES (Please attach additional pages as needed)

a) COUNTY GRANT MONEY REQUESTED \$ _____
(Up to a maximum of 50% of total expenditures)

b) OTHER GRANTS \$ _____
(Indicate whether grants are planned, applied for, or received)

\$ _____

\$ _____

\$ _____

c) CASH DONATIONS \$ _____

\$ _____

\$ _____

\$ _____

d) VOLUNTEER GOODS & SERVICES \$ _____
(Total value of VOLUNTEER LABOUR from EXPENDITURES)

e) APPLICANT'S CONTRIBUTION \$ _____

TOTAL REVENUE \$ _____

3) BALANCED BUDGET: (= \$0.00)

| | |
|--------------------|----------|
| TOTAL REVENUE | \$ _____ |
| (—) | |
| TOTAL EXPENDITURES | \$ _____ |

Documentation

PLEASE ATTACH THE FOLLOWING DOCUMENTS/INFORMATION TO YOUR APPLICATION

- MINUTES OF MOST RECENT ANNUAL GENERAL MEETING: DATED: _____
(For example, if a group has applied for Capital funds from the County's 2018 budget, then they must provide minutes from 2017)
- MOST RECENT FINANCIAL STATEMENTS: DATED: _____
(Including two (2) Executive Officer signatures)
- CURRENT YEAR ASSOCIATION BUDGET DATED: _____
- LIST OF EXECUTIVE OFFICERS
- MOST RECENT PROOF OF FILING FROM ANNUAL RETURN DATED: _____
If a society does not provide proof of filing for more than one year, then the County cannot approve the request.

CORPORATE ACCESS NO.: _____

- ANTICIPATED VOLUNTEER CONTRIBUTION (if applicable)
- WRITTEN QUOTES/ESTIMATES – for each part of the project

Submit Your Application

Applications can be submitted in person, by mail, fax, or email to:

Attn: Grants Officer
Big Lakes County
P.O. Box 239, 5306-56 St.
High Prairie, AB T0G 1E0
Phone: (780) 523-5955 Fax: (780) 523-4227
Email: Grants@BigLakesCounty.ca