



APPLICATION (INTAKE) FORM

GRIMSBY COMMUNITY DEVELOPMENT GRANT (GCDG) PROGRAM

SECTION I – INSTRUCTIONS

Please [contact us](#) if you have any questions or require assistance

Please **read** before completing this application form

- Applications with insufficient detail to allow proper evaluation may be disqualified from consideration
- The Application Guide and Grant Policy contain information on project eligibility, program requirements and project parameters
- Grant Matrix outlines the scoring criteria
- The following documentation is required to be submitted as part of the application:
 - Application form
 - Organizational constitution or governing by-law
 - Financial statement (two most recent)
 - Audited statements are required for applicants requesting greater than or equal to \$30,000

SECTION II – APPLICATION ELIGIBILITY

1. LEGAL NAME OF APPLICANT *(as it appears in incorporated documents, letters etc.)*

2. APPLICANT MAILING ADDRESS

Street, unit: _____

City: _____ Province: _____ Postal Code: _____

3. BOARD OF DIRECTORS/ORGANIZING COMMITTEE *(include titles and full names of 5 key Board members)*

4. IS THE ORGANIZATION A NOT-FOR-PROFIT CORPORATION OR REGISTERED WITH REVENUE CANADA AS A CHARITY?

YES ☐ NO ☐

Please provide the registration number: _____

5. IS THE ORGANIZATION IN GOOD STANDING WITH THE TOWN OF GRIMSBY? *i.e. applicant is not in default of previous grant reporting or has amounts owed past 30 days)*

YES ☐ NO ☐

6. PROVIDE A BRIEF DESCRIPTION OF THE ORGANIZATION. *Include the following:*

- *Objectives, mandates, core activities, and or key products/services*
- *Details on the organization's structure and how it is governed (e.g. board of directors etc.)*
- *Primary target & demographic group(s) the organization serves (include estimated numbers)*

SECTION III – AUTHORIZED ORGANIZATION CONTACT

7. PRIMARY CONTACT FOR THE APPLICATION:

Name: _____ Title: _____

Email: _____ Telephone: _____

8. ALTERNATE CONTACT

Name: _____ Title: _____

Email: _____ Telephone: _____

SECTION IV – PROJECT INFORMATION

9. PROJECT NAME: _____

10. PROVIDE A BRIEF DESCRIPTION AND OBJECTIVE OF THE PROJECT. *Include the following*

- *What the project will achieve*
- *Why the project is needed*
- *Community need(s) the project addresses*
- *Describe how the project will benefit Grimsby residents*
- *Strategy (steps) in place to achieve project objectives*

11. WHAT ARE THE BENEFITS OF THE PROJECT?

Consider community support, economic, accessibility, safety etc. Include benefits to Grimsby residents.

12. DESCRIBE HOW THE GRANT WILL SUPPORT THE PROJECT PLAN OR LONG-TERM INITIATIVE

13. ESTIMATED START DATE OF PROJECT (YYYY-MM-DD): _____

14. ESTIMATED END DATE OF PROJECT (YYYY-MM-DD): _____

15. HAS YOUR ORGANIZATION APPLIED FOR, OR IS APPLYING FOR ANOTHER TOWN OF GRIMSBY GRANT?
IF YES, SPECIFY GRANT. IF NO, ENTER N/A

SECTION V – PROJECT SUCCESS

16. PROVIDE RISK ASSOCIATED WITH THE PROJECT AS WELL AS CORRESPONDING MITIGATION STRATEGIES. *Include any contingencies or uncertainties to account for such as financial, technical, regulatory, supply chain etc.*

17. DESCRIBE THE ORGANIZATION’S CAPACITY TO EXECUTE THE PROJECT. *For example, available resources including staffing, volunteers, community support etc.*

18. HOW WILL THE SUCCESS OF THE PROJECT BE MEASURED? *Include performance targets and specific measurable indicators, for example, the number of participants, number of residents supported etc.*

19. DESCRIBE HOW THE PROJECT ALIGNS WITH THE [2023-2026 COUNCIL STRATEGIC PRIORITIES](#).

20. IS THERE CURRENTLY COMMUNITY SUPPORT FOR THE PROJECT? INDICATE HOW THE SUPPORT ENHANCES THE PROJECT. *Examples of community support can include the number of volunteers or volunteer hours committed to the project, partnership/collaboration with other local organizations etc. Include specific names of supporting partners if applicable.*

SECTION VI – PROJECT BUDGET

21. TOTAL PROJECT COST BY CATEGORY (*See Application Guide for Eligible Costs*)

Cost Category	Amount
<i>Facility Construction/Renovation</i>	
<i>Equipment Purchase/Installation</i>	
<i>Project Management/Professional services</i>	
<i>Incremental wages/Contracted services</i>	
<i>Supplies/Materials</i>	
<i>Marketing</i>	
<i>Entertainment</i>	
Total Project Costs	
Requested Town of Grimsby GCDG Program <i>(maximum is 30% of project budget up to \$100,000)</i>	

22. FUNDING SOURCES

Funding Source	Amount of Funding	Status of Confirmation
Town of Grimsby GCDG Program		
Total Amount of funding		

Please note that the total project costs and total amount of funding in the tables (20) & (21) above must be equal

SECTION VII – FUNDING REQUEST

23. THE TOWN OF GRIMSBY IS NOT ABLE TO FULFILL THE REQUEST FOR THE DESIRED AMOUNT, WOULD THE APPLICANT BE WILLING TO ACCEPT A MODIFIED AMOUNT?

YES ☐ NO ☐

24. IF A MODIFIED AMOUNT IS ACCEPTED, HOW WILL THIS IMPACT YOUR PROJECT?

For example, project scope will be modified, additional funding will be obtained etc. Please be specific.

SECTION VIII – SUPPORTING DOCUMENTATION

25. APPLICANT MUST PROVIDE THE FOLLOWING DOCUMENTATION TO ACCOMPANY THIS APPLICATION

- Application form
- Organizational constitution or governing by-law
- Financial statement (two most recent). Audited statements are required for applicants requesting greater than or equal to \$30,000.

Please confirm that the mandatory documentation, as described above has been included in the application submission ☐ **Yes**

SECTION IX – ATTESTATION AND SIGNATURE

- a. I have read and understood this request for support and will submit all the required information with this proposal. I understand that incomplete applications submitted after the deadline cannot be assessed and will be deemed ineligible.
- b. I have authority to submit this request on behalf of the applicant organization
- c. The information provided herein is complete, true and accurate. Any other information given in the future in connection with the carrying out the activities of the project outlined will also be complete, true and accurate.

☐ **I Agree**

Print name of Principal Officer

Print name of Principal Officer

Signature of Principal Officer

Signature of Principal Officer

Title

Title

Date

Date