



Community Capital Project Grant 2021 Application Form

INSTRUCTIONS: Please complete all sections fully, and ensure declaration is signed/dated.

PART A - APPLICATION INFORMATION					
Organization (as it appears on Certificate of Incorporation)					
Legal Name:					
Incorporation / Act Registered Under:		Registration No.:			
Mailing Address:				Postal Code:	
Contact Person:					
Work/Cell Number:		Other:		Fax:	
Email:					
PART B - FACILITY INFORMATION					
Name of Facility or Location of Capital Equipment:					
Street Address:				Postal Code:	
Registered Owner:					
Facility Lease Holder:					
PART C - PROJECT INFORMATION					
Type of Project: <i>(Choose from the following which best describes the scope of the project)</i>					
		New Facility Construction		Facility Technological Upgrade	
		Facility Expansion		Capital Equipment	
		Retrofit Existing Facility Space		Planning Assistance	
Anticipated Project Start Date:				Completion:	
Project Description Summary: (using 1000 words or less, use additional pages if necessary)					

PART D - PROJECT COSTS & FUNDING

TOTAL PROJECT COSTS: \$ (Please attach a breakdown of cost estimates for the project)	
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PROJECT FUNDING

Community Capital Project Grant <i>(Maximum 1/3 of total project up to \$200,000)</i> : \$	
Other Grants: \$	
Cash: \$	
In-Kind/Donated Labour/Services: \$	
TOTAL PROJECT FUNDING: \$ (Please attach a detailed list of matching funding)	

OPERATING IMPLICATIONS

Anticipated Annual INCREASE or SAVINGS in Operating Expenses: (+, -) \$	
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Facility Operating Impact Summary

Describe the impact of the project on facility operating costs. Describe how you intend to fund any future additional costs:

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PART E - PROJECT BENEFITS

ORGANIZATION & MEMBERSHIP

How will this project benefit the organization? Why is the project required?

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PART E - PROJECT BENEFITS (Con't)

COMMUNITY

Describe the benefits for the general community:

Empty space for describing community benefits.

REPORTING & RECOGNITION

Upon completion, projects must be reported with an indication of how funding support was recognized. Describe how your organization will acknowledge funding assistance:

Empty space for describing reporting and recognition.

PART F - CHECKLIST OF SUPPORTING DOCUMENTS (To be attached with completed application)

ORGANIZATION INFORMATION	ATTACHED		PROJECT INFORMATION	ATTACHED
List of Board & Executive			Description Details	
Previous Year Financial Statement			Cost Details	
Membership/Use Profile			Funding Details	
Organization Approval Motion			Owner Supported Letter	
Current Operating Budget				
Business/Strategic Plan/Bylaws				

Empty space at the bottom of the document.

PART G - AFFIRMATION

I DECLARE THAT: I AM A DULY AUTHORIZED REPRESENTATIVE HAVING LEGAL AND/OR FINANCIAL SIGNING AUTHORITY FOR THE ABOVE ORGANIZATION.

- The information contained in this application and supporting documents is true and accurate and endorsed by the applicant.
- The general public shall have access to this facility for the provision of leisure and/or community services.
- An accounting of spending, showing compliance with conditions of the grant shall be provided at completion of project no later than two years from date of the grant cheque.
- Any grant awarded shall be used solely for the purposes stated within this application and according to program parameters.
- As a condition of accepting financial assistance, access to all financial statements and records having any connection with monies received is hereby granted to the City Manager or his designated representative.

AUTHORIZED SIGNATURE

<i>Authorized Signature</i>	<i>Name and Title (please print)</i>	<i>Date (mm/dd/yyyy)</i>

The personal information collected on this form is in accordance with section 33 of Alberta's Freedom of Information and Protection of Privacy Act (the Act). It will be used for the purpose of determining eligibility for Community Capital Project Grants. The information will be disclosed in accordance with section 40 of the Act which may include public disclosure. If you have any questions in regards to the collection, use or disclosure of this information, please contact Lori Harasem, (403) 320-4716 or lori.harasem@lethbridge.ca.

Date Received at Recreation & Culture Office:		Initials:	
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