

Community Facilities Improvement Program

Application Form

Application Deadline: February 28, 2019

APPLICANT INFORMATION				
Name of Applicant Organization *				
Street Number *	Street Address*			Suite
PO Box	City/Town *	County *	Province *	Postal Code *
Email *		Website		

Provide your Nova Scotia Registry of Joint Stocks Registration Number.*		
Identification Number (Canada Revenue Agency)		
CHAIRPERSON	APPLICATION CONTACT	
Chairperson *	Contact Name *	
Telephone (Primary) *	Telephone (Primary) *	
Telephone (Alt)	Telephone (Alt)	
Fax	Fax	
Email *	E-Mail	

Applicant Organization

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SPECIFY ORGANIZATION'S PRIMARY TYPE OF ACTIVITY

Community-based Activities	Diversity Activities
Culture Activities	Not listed above, please specify

PROJECT INFORMATION

Provide a short description of the proposed project (1 sentence) *

Project Start Date *	Project End Date *
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Amount Requested (Not more than 75% of total costs) *	Total Proposed Project Cost *
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Location of Proposed Project

<p>1. Does the organization own the property to be considered or maintain a long-term lease of at least 5 years with the property owner?</p> <p>If yes, please attach a copy of lease or proof of ownership.</p>	Yes	No
<p>2. Has this project been funded previously under this program? If yes, when?</p>	Yes	No
<p>3. Has/will this project receive other provincial capital funding?</p> <p>If yes, when?</p> <p>From what program?</p>	Yes	No
<p>4. Has the organization received other provincial capital funding?</p> <p>If yes, when?</p> <p>From what program?</p>	Yes	No

YOUR PROPOSED PROJECT- The following questions form the main part of your application. Please answer in full.

1. Provide a brief description of your organization, including when it was established, mandate, and nature of regular activities.
2. Provide a full description of the proposed objective of your project. Include dates and other information which helps describe how and what will happen. If possible, please include images of the area(s) where capital work will be undertaken. If the project costs exceed \$5,000, provide at least one cost estimate from an external service provider (i.e. contractor).
3. If your project is successful, what community outcomes or benefits will it achieve?
4. Provide a full description of how the project will help make your facility more sustainable and/or its impact on services to the community.
5. Detailed financial information for your proposal must be provided. There is a financial template (available on our website) which can be completed and included with your application.

CONTACT US – SEND APPLICATION MATERIALS TO:

<p>Cape Breton Island</p> <p>Cape Breton Regional Office 305 Esplanade, Suite 101 Sydney NS B1P 1A8</p> <p>Larry Maxwell Larry.Maxwell@novascotia.ca Phone: 902-563-2380 Fax: 902-563-2565</p>	<p>Counties of Yarmouth, Shelburne, Queens, Lunenburg and District of Argyle</p> <p>South Shore Regional Office 312 Green Street, PO Box 9000 Lunenburg NS B0J 2C0</p> <p>Debby Smith Debby.Smith@novascotia.ca Phone: 902-634-7505 Fax: 902-634-7542</p>
<p>Halifax Regional Municipality</p> <p>Central Regional Office 1741 Brunswick Street, 3rd Floor, PO Box 456 Halifax, NS B3J 2R5</p> <p>Deborah Fram Deborah.Fram@novascotia.ca Phone: 902-424-6608 Fax: 902-424-0710</p>	<p>Municipality of East Hants, Cumberland County, Colchester County</p> <p>Fundy Regional Office 80 Walker Street, Suite 1 Truro, NS B2N 4A7</p> <p>Peter McCracken Peter.McCracken@novascotia.ca Phone: 902-893-6215 Fax: 902-896-2425</p>
<p>Municipalities of West Hants and Clare, Counties of Digby, Annapolis and Kings</p> <p>Valley Regional Office 10 Webster Street, Suite 200 Kentville, NS B4N 1H7</p> <p>Meg Cuming Meg.Cuming@novascotia.ca Phone: 902-679-4390 Fax: 902-679-6748</p>	<p>Counties of Guysborough, Antigonish and Pictou</p> <p>Highland Regional Office 149 Church Street, Suite 4 Antigonish, NS B2G 2E2</p> <p>Rae Gunn Rae.Gunn@novascotia.ca Phone: 902-863-7380 Fax: 902-863-7477</p>

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CONSENT

I consent to the sharing of my information with other government departments, organizations or contractors that the Department of Communities, Culture and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) or Arts Nova Scotia has a data sharing agreement with.

I consent to the Department of Communities, Culture and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) or Arts Nova Scotia adding my name, mailing address and e-mail to a distribution list to receive updates on programs, services, news and events.

DECLARATION

As an individual applicant:

- I have carefully read the application guidelines and eligibility criteria for this program, and confirm that I meet the eligibility criteria.
- I am aware that all overdue final reports, where applicable, for previously funded applications must be submitted and approved before any additional requests or applications for funding can be considered.
- I understand that my current application may not be eligible if any of my final reports have not been submitted and approved.
- I am aware that information I have provided in this application form is subject to the *Freedom of information and Protection of Privacy Act*, and any request for my personal information requires my written consent before it can be shared with a third party.

As a representative of an organization, consortium or group (including ad-hoc group):

- I have carefully read the application guidelines and eligibility criteria for this program, and confirm that the organization, group (including ad-hoc) or consortium I represent meets the eligibility criteria.
- I am aware that all overdue final reports, where applicable, for previously funded applications must be submitted and approved before any additional requests or applications for funding can be considered.
- I understand that my current application may not be eligible if any of my final reports have not been submitted and approved.
- I will act as the representative of the organization, consortium or group and will keep all participants informed of the application content and any funding decision.

I accept all of the declaration statements above that are applicable to me as an individual application or as a representative of an organization, consortium or group. I understand that not accepting these statements as true will affect eligibility for this funding application.*

Signature*	Title (if applicable)
Name (print) *	Date *