Community Facilities Improvement Program

Final Report Template 2021-2022



A final report for the Community Facilities Improvement Program is complete once the following items have been received:

- All questions have been answered. You may use a separate attachment to complete your answers if necessary.
- You have attached a maximum of five photos demonstrating the completion of your project.
- The tables in Section 4 (Project Details) are completed.

SECTION 1: APPLICANT INFORMATION

You must attach or include proof of payment with your final report (i.e., paid receipts/invoices, and cancelled cheques).

Please Note

Name of Organization

The second (final 20%) payment will reflect the actual total spent, up to the total approved amount or 75% of the total project costs, whichever is less.

Your Name

- You must retain all receipts. The province reserves the right to conduct an audit.
- You may also be contacted by department staff to conduct a site visit.

Your Email			Your Telephone #				
SECTION 2A							
Please respond in the blank spaces provided. If more space is needed, please use a separate attachment.							
1. Provide a brief summary of your project and what was accomplished.							
O Millert ellert terre de la	H.S. and S. A. L.	I					
2. What short-term impacts did	2. What short-term impacts did this project have on 3. W			What long-term impacts will this project have on			
a. Your facility?		a. Your facility?					
b. Your services/regular ac	ctivities?		Э.	Your services/re	gular activitics?		
		L	J.	Tour services/reg	guiai activities:		
c. The users of your facilit	v?		C.	The users of you	r facility?		
	,	,	0.	The decre of year	r raomey.		
4. How did you acknowledge the Department's financial contribution?							
(attach screen shots or copies of any printed materials on which the logos were included).							

	TION 2B e respond in the blank spaces provided. If more	space is nee	eded. please	use a sepai	ate attachn	nent.	
	Statement	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree	Not Applicable
Α.	This funding helped to address an urgent need to improve the facility.						
Pleas	e explain:						
В.	As a result of this funding, our operational						
	costs will be more affordable.						
Pleas	e explain:						
C.	This funding will help to ensure that the						
	facility can serve more Nova Scotians.						
Pleas	e explain:						
D	This funding helped enhance the						
D.	community's use of the facility.						
Pleas	e explain:	·				l	

SECTION 3A: PROJECT BUDGET DETAILS - PROJECT WORK COMPLETED & ACTUAL PROJECT COSTS*

Complete the table below with details of the project work completed and actual project costs. Ensure that you have also addressed the following points:

- If the project involved external contractors/suppliers, please attach a final invoice(s) that includes a detailed breakdown of labour and materials.
- Where possible, attach images of your facility and the area(s) where project work was completed.

NOTE - The Total Amount Funded from this Program will not exceed the Approved Amount or 75% of Total Actual Project costs, whichever is lower. The final payment will be assessed on these criteria.

What happened and how?	Who was involved?	When?	Cost (\$)
Example 1: Replaced drywall & insulated walls — Contractor assessed walls inside the hall, removed old drywall, inserted insulation bats & added new drywall on the structural frame. Material & labour included. Invoice & paid receipt attached.	ABC Contractor Inc.	Aug 1 – Aug 31, 2021	\$5,000
Example 2: Painted walls – 2 volunteers painted walls inside the hall once ABC Contractor finished their work. Donated/in-kind cost is 2 volunteers x 3hrs/day x 5days x \$20/hr = \$600	Volunteers	Sept 1 – Sept 7, 2021	\$600
Total Actual Pr			

SECTION 3B: PROJECT BUDGET DETAILS - PROJECT REVENUES AND CONTRIBUTIONS*

Complete the table below with details of the actual project revenues and contributions. Ensure that you have also addressed the following points:

- Your organization must have contributed to at least 10% of the Total Actual Project Costs.
- The value of donated/in-kind contributions of labour and materials can be included below if they were essential to the project.
- Total Actual Project Revenues and Contributions must be equal to the Total Actual Project Costs.

What were the sources of revenue/contribution for this project?	Cash (\$)	Donated/ In-Kind (\$)	Total (\$)	Notes	
Your Organization's Contribution: Refer to points mentioned above					
Total Amount Funded from this Program: Will not exceed the Approved Amount or 75% of Total Actual Project Costs, whichever is lower		N/A			
Provincial Funding from other CCH programs or other NS Government Departments (specify below):					
		N/A			
		N/A			
		N/A			
Federal Funding (specify below):					
		N/A			
		N/A			
Municipal Funding (specify below):					
		N/A			
		N/A			
Corporate / Business Sponsorships (specify below):					
		N/A			
		N/A			
Other Sources of Funding (specify below):					
		N/A			
		N/A			
Total Actual Project Revenue					

SECTION 4: CONSENT

I consent to the sharing of information contained in this final report with other government departments, organizations, or contractors that the Department of Communities, Culture, Tourism and Heritage (including African Nova Scotian, Acadian and Gaelic Affairs) has a data sharing agreement with.

I confirm that I am authorized to submit this final report on behalf of my organization or Mi'kmaw Band and that the statements in the report are complete and accurate, to the best of my knowledge.

I am aware that information I have provided in this final report 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.

By signing below, you accept all the consent statements above that are applicable to you as a representative of an organization or Mi'kmaw Band.

Signature:	Title:
Print Name:	Date:

Submit your completed final report by e-mail, mail, or fax on or before the final report due date

E-Mail: Communities NS@novascotia.ca

Include "Community Facilities Improvement Program" in the subject line

Mail:

Communities Nova Scotia Unit Department of Communities, Culture, Tourism & Heritage PO Box 456 STN Central 1741 Brunswick Street, 3rd Floor Halifax, NS B3J 2R5

Fax: (902) 424-0710

For questions, please call the phone number below:

(902) 424-5793