

Community Access-Ability Program Application 2019-2020

Use this cover sheet as the first page of your proposal. Attach the other documents to it. Use the check list (page 2) to ensure all necessary information relevant to your proposal is included. Incomplete submissions may delay your application until the next deadline.

Community Group/ Organization (Applicant):		
Type of Project:		
Example	: Ramp, Lift	
Type of Facility:	Location:	
Example: Community Hall, Playground	Community	
Contact Name:	Title:	
Telephone:	Fax:	
Cell:	E-mail Address:	
Organizational		
Mailing Address:	Civic Address or Box #	
Municipality:	Postal Code:	
Project Start Date:	Project End Date:	

Please complete both budget tables, Cost table total should equal in value to the Funding table total. PROJECT ESTIMATED COSTS: PROJECT ESTIMATED FUNDING:

design (engineer, architect, consultant)	\$
construction (<i>attach estimates*</i>) Materials	\$
Labour	\$
permit fees (where applicable**)	\$
equipment	\$
other (please specify)	\$
TOTAL	\$

* Provide detailed estimates separately. It is recommended that a minimum of 3 bids on contracted work be obtained. Cost overruns of projects are the responsibility of the applicant.

** Building Permits are required for many renovation projects. Please consult with your local municipal building official to determine if a permit is required Applicant's Contribution (actual
cash)\$Donated Labour/material/equipment
(detail separately)\$Other Groups or organizations**
(detail separately)\$Access-Ability Grant*\$TOTAL (from Project Estimated Costs)\$

*This amount generally may not exceed 66.6% of TOTAL, or \$50,000.00 (whichever is less).

**Specify expected amount of project funding by source[s). Attach letters indicating funding commitments where appropriate.

All renovations or construction must conform to the Barrier Free Design requirements of the Nova Scotia Building Code Regulations and the National Building Code of Canada

Please submit <u>all</u> documents from the following list. Incomplete submissions will delay consideration of your project.

- Description of organization: Short description of the purpose and history of your organization. If applying for more than \$10,000, applications must include a detailed description of, and support in writing of, at least two other partners, and provide documentation confirming a stated mandate to work with disabled persons.
- Description of existing facility: Physically, how does the facility function now? Include photos and/or drawings for clarity.
- **Documented use of facility:** Identify activities that take place, community groups that use the facility and frequency of use.
- Description of Proposed Project: Provide a detailed description of the project including, how the project will improve the existing facility accessibility. How will community members benefit from these improvements? You may include photos and/or drawings for clarity.
- Other Grants: Identify all other sources of grant funds.
- Copy of lease agreement or proof of ownership: For proposed improvements to leased facilities please include written approval of property owner and copy of current lease. Required documentation for proof of ownership could be the deed or property assessment.
- Proof of Incorporation and/or charitable status: Provide evidence of incorporation and identify how long the organization has existed and if co-sponsored, similar proof from the co-sponsoring organization.
- **Detailed Estimates:** a minimum of 3 bids recommended on contracted work. If 3 bids can't be obtained, please explain why.
- Proof of skilled labour: Provide a copy of the contractor's professional ID card, if using skilled labour as an in-kind contribution in the project.
- **Justification of Bid Selected:** Provide justification of bid selected if it is not the lowest one received.

DECLARATION

The information provided on this application form and accompanying documentation is accurate to the best of my knowledge. I hereby give Communities, Culture and Heritage authority to verify any and all information pertaining to this application. I understand that projects which are funded may be subject to audit by the Province of Nova Scotia, who reserve the right to review and inspect projects and related documentation during and following completion of the project.

Signing Authority for the Applicant

Date

Please forward your proposal to: Community Access-Ability Program c/o 1741 Brunswick St., 3rd Floor P. O. Box 456, STN Central Halifax, Nova Scotia Canada B3J 2R5