

TOWNSHIP OF NORTH STORMONT 2019 Municipal Grant Application

Application Due Date - October 31, 2018

Please ensure that you provide full, complete and clear answers to the questions on this form. Failure to provide the required information may result in your group being ineligible. Missing or unclear information may result in the application being delayed or rejected.

Use a combination of this form and support sheets as appropriate. Please label your attachments according to the section it relates to.

Part A – Community Agency/Organization Information

Outline the mission statement, purpose and objectives of your organization.

Name of Community Agency/Organization	и:	
Contact Person:	Telephone No	
Mailing Address:		
Email	Website	
Part B - General Information		
Number of Members	Membership Fee, if applicable	_
Type of organization (ie: Registered Cha	rity, Non-Profit Organization, etc.)	
Registration #: Incorporated as Non-Profit Organization:	Yes No	

Part C - Grant Request

Under what classification are you requesting a Grant?
Corporate Grant (annual operating budget)
Community Project Grant (One-time assistance)
Amount Of Grant Request: \$
Expressed as a percentage of the total revenue for your organization? %
Has your organization received a municipal grant in previous years?Yes No
Amount of previous grant received \$

Purpose of Grant

Provide an overview of the service your organization provides to the community and how this supports the Township's Strategic Priorities. Please include the benefits the community would receive as a result of the grant.

Project Funding (indicate wh sheet if necessary)	at other source funding has been rec	eived or applied for. Use a separate
Senior levels of governme	nt	United Counties of SDG
Fundraising events		_ Other sources (please specify)
Donations		
Please provide specific details:		
Will the Township of North Sto	rmont be the primary funding source	of this service/program?
Yes No		
What may be the implications	if a municipal grant is not approved?	
Application Checklist		
	rrent year's budget, detailing expend f revenue must be submitted with th	itures and revenues, including others is request.
Current Budget	Proposed Budget	Board of Directors Listing
Statement of Revenue and	d Expenditures, signed by 2 Directors	AGM Minutes

Sample Budget format to be used to demonstrate funding request:					
	2017	2017	2018	2019	
	Actual	Budget	Projected to Year-End	Request	
REVENUE					
Township of North Stormont					
Program Revenue					
Donations/fundraising					
Other (specify)					
EXPENDITURES					
Salaries & Wages					
Materials & Supplies					
Services & Rents					
Other					
Capital Expenditures					
Surplus / (Decifit)					

Part D – Signature of Authorized Official(S)

Signed on behalf of the or			
Signature	Position	Date	
Signature	 Position	 Date	_

NOTE: The <u>release</u> of all grant funds is contingent upon the Township receiving a copy of your financial statements for the previous year as well December 2018 bank statements (if your financial statements do not clearly identify Township funding request, please use the notes to indicate in which revenue category Township funding is included.) All grants are subject to Council approval

Submit by mail or email the completed original application and supporting documents to:

Township of North Stormont – Finance Department

15 Union Street P.O. Box 99
Berwick ON KOC 1G0
Email: finance@northstormont.ca

Any application received after due date October 31, 2018 will not be considered