



Capital Project Grant Application Form

Township of Zorra
163 Brock Street, PO Box 189 Thamesford ON, N0M 2M0
Ph. 519-485-2490 • 1-888-699-3868 • Fax 519-485-2520
Website www.zorra.ca

Send completed applications to the Township of Zorra Manager of Finance at kgrogan@zorra.ca or call 519-485-2490 ext. 7270 for assistance.

Contact Information:

Organization name: _____

Contact person (first name, last name): _____

Phone number: _____

Email address: _____

Organization/business address: _____

Organization Information:

Please describe the purpose and function of your community organization:

Please select the one that applies:

☐ We are a community organization

a) How many years has your organization been in existence? _____

☐ We are a committee of council

Please provide details on a previous capital project that the organization successfully completed:

Project Information:

Please describe, in detail, the capital project that you are requesting a grant for:

What community support is there for the project?

Are there any other community partners involved with the project? If yes, please elaborate.

Will the asset be a township-owned asset? Yes No

Will the community organization be responsible for maintaining the asset? Yes No

How long is the life expectancy of this asset? _____

Once the capital project has been completed, what is the annual cost to maintain the asset?

What will be the future maintenance of this project? Please outline the activities and the projected cost.

Financial Information:

Please indicate the funding stream you are requesting: 70/30 HST

Please indicate the grant amount you are requesting: _____

Please provide the amount above as a percentage of the total project cost: _____

What type of contribution are you requesting:

- a) Grant paid in cash
- b) Provision of land by way of gift or long-term lease
- c) Services provided in-kind

Has the organization made a request for or received funds from the Township of Zorra prior to this application? Yes No

If yes, please list the Township funding that you have applied for or received funds from, and the monies you have received. Please also provide a history of what the prior funding was used for:

Has the organization made a request for or received funds from another foundation, organization etc. other than from the Township of Zorra? Yes No

If yes, please list the other funding that you have applied for or received funds from and the monies you have received:

What other sources of funding will you be receiving for this specific project?

Required Documents:

The following is a list of documents that are required to be included with your application. Failure to include any of the documents may result in your application being delayed and/or not being considered. (3-year plan, lifecycle strategy, business plan)

Has a list of the organization's executive board members been included? Yes No

Has the proposed budget for the following year been included? Yes No

Has the most recent financial statement for the organization been included? Balance Sheet and Revenue/Expenditure statements. Yes No

Has a business plan outlining the financing, timeline, and scope of the project been included?
Yes No

Has a lifecycle strategy illustrating the maintenance of the life of the asset in question been included? Yes No

Has a three-year proposed project schedule outlining the proposed future projects for the organization (attached to this form) been included? Yes No

Accessible Formats:

If you require this document to be in an accessible format, please contact the Director of Corporate Services at clerk@zorra.ca or 519-485-2490 ext. 7228.

Note: I understand by signing this application that the Township of Zorra makes no commitment to the payment of any grant prior to final Township Council approval. I also agree to submit a report within the grant calendar year outlining the success of the organization and the allocation of grant money.

Name/title

Signature

Application Due September 25

The personal information, as defined by the Municipal Freedom of Information and Protection of Privacy Act (MFIPPA), is collected under the authority of the Municipal Act, 2001 and in accordance with the provisions of MFIPPA. Personal information on this form will be used for the purposes for which it was collected. Questions about this collection of information should be directed to the Township of Zorra's office, 163 Brock Street, PO Box 189 Thamesford ON, N0M 2M0. Phone 519-485-2490.

