Regional Development Corporation



Project Number	
Date Received	
Riding Number	

			Kiain	g Number	
SECTION 1: BACKGROUND OF T	HE APPLICANT				
Legal name of the applicant (fac	cility owner / ev	ent / festiva	I)		
Incorporation type:	Municipality	First Na	tion	☐ Non-profit C)rganization
Street Address:			Mailir	ng Address (if diff	erent)
Name and title of the person wl	ho will ho the ar	uthorized co.	ntacti		
·	no will be the at		ilact.		
Name		Title			
Phone #		Fax			
Mobile		Emai	·		
Is this person an authorized* si	igning officer of	the applicant	:?	☐ Yes	□ No
% of HST refunded by the Cana	ıda Revenue Age	ncy: %			
*Evidence or supporting docume	entation demon	strating the c	contact	's authority with	the
·	ida Revenue Age	ncy: <u>%</u>			

*Evidence or supporting documentation demonstrating the contact's authority with the organization must be provided if requested.



SECTION 2: PROJECT SUMMARY (must be filled out for all applications)		
Project title:	Location of project:	
	(Town/City/Village)	
Project Description (include how project will	meet program objective)	
Expected Outcomes (Please include metrics,	if applicable)	
Estimated start date of the project:		
Estimated completion date of the project:		
Has funding been requested from other gove	ernment sources?	10
If so, please specify the Department and the name and contact information of your contact person at the Department		



SECTION 3: SELECT FUNDING CATEGORY (select only one) 1. COMMUNITY GROWTH INITIATIVE Estimated project costs and funding sources A) Estimated project costs – excluding taxes (you **B)** Proposed funding sources: must attach contractor/supplier estimates): **Building & Structures Applicant** Other Government Equipment **Programs** Event (include budget) Other (specify) **Requested CIF** Other (specify) contribution TOTAL (A) \$ TOTAL (B)

TOTAL (A) MUST BE EQUAL TO TOTAL (B)

2. COMMUNITY EVENTS & FESTIVALS

- Funding is open to any community event of festival (festivals, recognition event, anniversaries or other community event).
- Level of assistance is based on the projected expenses of the event's proposed budget which must be included in the application.
- Applicants will receive their funding once they have submitted a report of their final costs after the event.
- The final level of funding will be determined after a review of the submitted financial report.

Level of assistance will be based on the following grid:

Eligible Expenses	Level of Assistance	
\$1,000 - \$3,000	\$500	
\$3,001 - \$7,000	\$1,000	
\$7,001 - \$12,000	\$2,000	
\$12,001 - \$20,000	\$3,000	
\$20,001 - \$29,000	\$4,000	
\$29,001 - \$38,000	\$5,000	

Eligible Expenses	Level of Assistance	
\$38,001 - \$47,000	\$6,000	
\$47,001 - \$56,000	\$7,000	
\$56,001 - \$64,000	\$8,000	
\$64,001 - \$75,000	\$9,000	
\$75,001 +	\$10,000	



SECTION 4: AGREEMENT

The applicant shall allow any authorized representative of the Regional Development Corporation, at its discretion, reasonable access to the project site(s) and information to verify that the project has been undertaken and completed in accordance with the program objectives and guidelines.

I, (AUTHORIZED CONTACT) CERTIFY THAT THE INFORMATION CONTAINED IN THE APPLICATION IS CORRECT, AND I AGREE TO ABIDE BY THE GUIDELINES.

Name of applicant	Signature	Date

Please forward the completed **and signed** application form by mail, fax or electronically to:

Community Investment Fund Regional Development Corporation Chancery Place, P.O. Box 6000, Fredericton, New Brunswick, E3B 5H1

Telephone: (506) 453-2277

Fax: (506) 453-7988 Email: <u>RDC-SDR@gnb.ca</u> Website: <u>www.gnb.ca/rdc</u>

