

## **APPENDIX A**



Finance  
1 Centennial Square  
Victoria, BC V8W 1P6

T 250.361.0245  
E [grants@victoria.ca](mailto:grants@victoria.ca)  
[victoria.ca](http://victoria.ca)

# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: Fairfield Gonzales Community Association Telephone: 250-382-4604  
Mailing Address: 1330 Fairfield Rd. Email: vmcdonell@fairfieldcommunity.ca

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Contact Person: Vanya McDonell Email: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: 128210259

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Fairfield Food Forest Understory  
Project or program location: Robert J. Porter Park

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

Established in 2013 by the Fairfield Gonzales Community Association's Community Garden Committee. The Food Forest is a permaculture garden with many edible plants, trees, and native species. This application is to undertake additional plantings of 'understory', including annual and perennial species, which will increase the food growing capacity of the garden.  
By increasing food growing opportunities on public land, we hope to increase community members, park users, and school children's awareness and utilization of the Food Forest. This project supports the enhancement and stewardship of food system in Victoria and enhances the partnership between the City of Victoria, Community Association, and local residents working together to enhance the Fairfield Food Forest.

How many people will benefit from the project or program? 2000 Percentage of Greater Victoria Residents? 2.5%

What target audience will benefit? Park users, community members, Moss St Market-goers, SJD schoolchildren, FGCA clients



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1000 Amount Requested \$ 500  
How much is the organization contributing? \$ 500

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: April 2020 Expected Completion Date: September 2020

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 20 Total volunteer hours: 90  
Can the project or program occur without volunteer support? ☐ Yes ☒ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

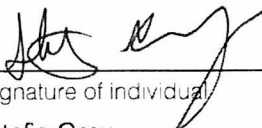
All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?


- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Website                                   | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media                              | <input type="checkbox"/> Newsletter               |
| <input type="checkbox"/> Sponsor plaque                                       | <input checked="" type="checkbox"/> Annual Report |
| <input checked="" type="checkbox"/> Other <u>Announcement at work parties</u> |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

- I/We will be in compliance with all applicable municipal policies and bylaws
- I/We organization will publicly acknowledge the grant awarded by the City (if applicable)
- We are in good standing with either: (1) the Province of BC as a registered Society or (2) the Canada Revenue Agency as a registered Charity
- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

  
\_\_\_\_\_  
Signature of individual  
**Stefie Gray**

\_\_\_\_\_  
Name  
  
\_\_\_\_\_  
Signature of authorized officer of support organization  
**Vanya McDonell**

\_\_\_\_\_  
Name

**Program Support Coordinator**  
\_\_\_\_\_  
Relationship to support organization (if applicable)  
**January 29, 2020**

\_\_\_\_\_  
Date  
**Co-Executive Director**

\_\_\_\_\_  
Position  
**January 29, 2020**

\_\_\_\_\_  
Date



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# Micro Grant Application Form

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## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: Mila Czernys Telephone: 250-381-1552 x117  
Mailing Address: 1240 Gladstone Avenue, Victoria BC V8T 1G6 Email: mila@fernwoodnrg.ca

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: Fernwood Neighbourhood Resource Group Society  
Mailing Address: 1240 Gladstone Avenue, Victoria BC V8T 1G6  
Contact Person: Chantille Viaud Email: chantille@fernwoodnrg.ca Telephone: 250-381-1552 x103  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: 107380982RR0001

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Trellis install and tool shed painting  
Project or program location: Fernwood Community Centre Kitchen Garden

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

We are applying for this micro grant to complete two projects: berry trellis install and mural painting on our tool shed.

Money from this grant will be used to purchase wood, parts, and paint and artists honorarium for these projects.

We need to install berry trellises in the Fernwood Community Centre Kitchen Garden to support our raspberry and tayberry patches. These plants need trellises to grow and flourish. By building trellises to support them, the raspberries and tayberries will produce more fruit for the community to enjoy and maintain the aesthetics of the site.

We would like to paint our tool shed to with a mural. We will be working with local artist Beth Threlfall to design and paint the shed with a colourful, vibrant design. This project nurtures arts in our neighbourhood and contributes to the health and well-being of our community.

Both these projects align with and support the enhancement and steward of public spaces, green spaces, and food systems. They maintain our Kitchen Garden to look more beautiful and orderly and facilitate community wellness.

How many people will benefit from the project or program? 10,000 Percentage of Greater Victoria Residents? ~12%

What target audience will benefit? The residents of Fernwood including, children, youth, families and seniors at our centre





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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1,100 Amount Requested \$ 500  
How much is the organization contributing? \$ 600

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: February 2020 Expected Completion Date: June 2020

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 2 Total volunteer hours: 10  
Can the project or program occur without volunteer support? ☒ Yes ☐ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

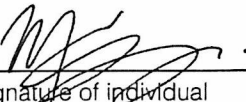
All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website      | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media | <input type="checkbox"/> Newsletter               |
| <input type="checkbox"/> Sponsor plaque          | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Other _____             |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

- I/We will be in compliance with all applicable municipal policies and bylaws
- I/We organization will publicly acknowledge the grant awarded by the City (if applicable)
- We are in good standing with either: (1) the Province of BC as a registered Society or (2) the Canada Revenue Agency as a registered Charity
- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

  
\_\_\_\_\_  
Signature of individual  
Mila Czemerys

Name A. Cui  
\_\_\_\_\_  
Signature of authorized officer of support organization  
Chantille Viaud

Name

Fernwood NRG Communications Coordinator

Relationship to support organization (if applicable)

January 28, 2020

Date

Executive Director Fernwood NRG

Position

January 29, 2020

Date



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# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to grants@victoria.ca

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: James Bay Neighbourhood Association Telephone: 250-360-0300  
Mailing Address: c/o #214-225 Menzies Street, Victoria BC V8V 2G6 Email: marg.jbna@telus.net

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: as above  
Mailing Address: as above  
Contact Person: Marg Gardiner Email: marg.jbna@telus.net Telephone: 250-360-0300  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: 5-003-1280

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Supplies for neighbourhood garden projects  
Project or program location: Various locations in James Bay

Which guidelines does this project or program fall under? ☒ Boulevard Gardening Guidelines ☐ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

### Purpose of the Grant/Description of the Project/Why the Grant is Needed:

The main purpose of the grant is to provide the supplies necessary to allow the JBNA to maintain and expand the scope of its neighbourhood gardening activities.

The neighbourhood gardening volunteers began in 2016, with a group working collaboratively to restore a herb bed on Michigan Street. This group now also gardens two nearby patches of boulevard and is planning to create an additional small garden in 2020. A neighbourhood seed exchange box will be installed in this garden early in 2020. Meanwhile two new groups have started on projects in other parts of James Bay, and we anticipate that at least one other garden will begin construction in 2020.

James Bay has a high proportion of residents who live in apartments and condos with no access to land and our allotment gardens have long wait lists. These projects provide social gardening opportunities for those who do not have access to land, as well as beautifying the neighbourhood, providing food for residents, and providing ecological benefits.

The funds will go towards such needs as: supplies to maintain the seed box, seeds and plants for new garden areas plus replacements and additions to existing gardens, soil amendments for existing and new gardens, replacements and additions to our tool stock, and purchase of a city-grade locked cigarette disposal unit for the garden at Michigan and Menzies, in order to reduce the number of cigarette butts being deposited in food-growing soil.

### How the proposed grant furthers city goals and objectives:

This project will:



How many people will benefit from the project or program? all JB resident Percentage of Greater Victoria Residents? 3 (CRD) %

What target audience will benefit? All James Bay residents, workers, and visitors (15% of Greater Vic res + vis)



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1200.00 Amount Requested \$ 500.00  
How much is the organization contributing? \$ 700.00

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: May 1, 2020 Expected Completion Date: Dec 30, 2020

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 10 Total volunteer hours: 250  
Can the project or program occur without volunteer support? ☐ Yes ☒ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website  | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media                                       | <input checked="" type="checkbox"/> Newsletter    |
| <input type="checkbox"/> Sponsor plaque  | <input checked="" type="checkbox"/> Annual Report |
| <input checked="" type="checkbox"/> Other <u>Monthly column in JB Beacon newspaper</u> |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

- I/We will be in compliance with all applicable municipal policies and bylaws
- I/We organization will publicly acknowledge the grant awarded by the City (if applicable)
- We are in good standing with either: (1) the Province of BC as a registered Society or (2) the Canada Revenue Agency as a registered Charity
- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

Kathryn Pankowski

Signature of individual

Kathryn Pankowski

Name

[Signature]

Signature of authorized officer of support organization

Marg Gardiner

Name

Community Garden Volunteer Coordinator (contractor)

Relationship to support organization (if applicable)

January 30, 2020

Date

President

Position

January 30, 2020

Date



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# Micro Grant Application Form

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## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: James Bay New Horizons - Pollinator Garden Telephone: 250-386-3035  
Mailing Address: 234 Menzies St. Victoria B.C. Email: accountant.jbnh@shawbiz.ca

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Contact Person: Sue Ann Gentry Email: sueanngentry@gmail.com Telephone: 250-595-4806  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: 11897-2728  
RR0001

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Pollinator Garden  
Project or program location: 234 Menzies - Irving Park

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

The Pollinator Garden continues its work to provide a demonstration garden that showcase plants and environments that support both local pollinators and a honey bee apiary. Our plants and trees are tended to using organic practices and we encourage diverse plantings to support pollinators through out the year.

Our focus is to use the garden as an opportunity to engage with the public and have the conversations that help build community and work together to support all of the green spaces no matter how little or large. We have onsite composting which we hope to expand in the coming years.

How many people will benefit from the project or program? 1,500 Percentage of Greater Victoria Residents? 100 %

What target audience will benefit? Anyone that lives or walks through James Bay as we are on a main thorough fare.



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program Total Cost \$ 2,500.00 Amount Requested \$ 500  
How much is the organization contributing? \$ 2,000

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: January 1, 2020 Expected Completion Date: December 31, 2020

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 10 Total volunteer hours: 600  
Can the project or program occur without volunteer support? ☐ Yes ☒ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website      | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media | <input type="checkbox"/> Newsletter               |
| <input type="checkbox"/> Sponsor plaque          | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Other _____             |   |

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Signature of individual  
Sue Ann Gentry

Name

Kim Dixon

Signature of authorized officer of support organization  
Kim Dixon

Name

Bookkeeper & Volunteer Gardener

Relationship to support organization (if applicable)  
January 15, 2020

Date

Executive Director

Position

January 15, 2020

Date



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1 Centennial Square  
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# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: North Park Neighbourhood Association Telephone: 613-888-2106  
Mailing Address: Box 661, 185-911 Yates Street, Victoria, BC V8Y 4Y9 Email: coordinator@npna.ca

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: North Park Neighbourhood Association  
Mailing Address: Box 661, 185-911 Yates Street, Victoria, BC V8Y 4Y9  
Contact Person: Sarah Murray Email: coordinator@npna.ca Telephone: 613-888-2106  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: S0035907

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Franklin Green Community Garden - Work Parties  
Project or program location: Franklin Green Park

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

The funds from the Micro Grant will be used towards purchasing program supplies for the seasonal workshops, garden tours, and/or work parties held at the Franklin Green Park Community Garden. The workshops and work parties will be organized by the Volunteer Coordinator with the support of the NPNA Board. These funds will help provide honourarium to Indigenous experts, and to purchase food and activity supplies to ensure that all of the garden events remain free and accessible to all City of Victoria residents. We will have bus tickets available to offer guests of the garden events.

This grant is needed to ensure that all of the garden workshops, tours, and work parties are able to be inclusive, fun, community building attractions. We will use the micro grant to support locally owned and operated businesses where possible.

How many people will benefit from the project or program? 3000 Percentage of Greater Victoria Residents? 1%

What target audience will benefit? residents and visitors of North Park, downtown office workers, families, youth, seniors



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1000 Amount Requested \$ 500  
How much is the organization contributing? \$ 500

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: May 2020 Expected Completion Date: April 2021

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 3 Total volunteer hours: 110  
Can the project or program occur without volunteer support? ☒ Yes ☐ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

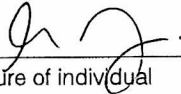
All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website      | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media | <input checked="" type="checkbox"/> Newsletter    |
| <input type="checkbox"/> Sponsor plaque          | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Other _____             |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

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Signature of individual  
Sarah Murray

Name  
  
Signature of authorized officer of support organization  
Allison Ashcroft

Name

Community Coordinator  
Relationship to support organization (if applicable)  
January 22, 2020

Date  
Board Member  
Position  
January 22, 2020  
Date



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# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: North Jubilee Neighbourhood Association

Telephone: X

Mailing Address: 1792 Kings Road, Victoria, BC V8R 2P1

Email: njnacommunity@gmail.com

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: North Jubilee Neighbourhood Association

Mailing Address: 1792 Kings Road, Victoria, BC V8R 2P1

Contact Person: Janis Van de Geer

Email: janney.claire.alexi@gmail.com>

Telephone: 250-508-2182

Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: S-0031585

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: North Jubilee Spirit Pollinator Garden

Project or program location: Spirit Garden – Licensed Community Garden with the City of Victoria

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

The Spirit Pollinator Garden will be a project focused on pocket plantings of diverse native plant species throughout the Spirit Garden to support pollinators that are native to our Eastern Vancouver Island Eco-region. Eastern Vancouver Island has a large diversity of native bees but they are threatened by habitat loss, pesticide use, invasive plants, climate change and disease. Native pollinators require native plants species to survive and thrive. This project will use the funding to purchase native plants, grasses and ferns (for bees to nest under) that have successful bloom times over the entire growing season – some native plants include ocean spray, black twinberry, hardhack, gumweed and camas. Funding will also be used to support signage for these plantings, as to educate the public who use the Spirit Garden. This project aligns with the stewarding of public green spaces and food systems, as native plantings are necessary for the insect pollinators that support and help create 1/3 of the food we eat. Plant selection for year round blooms will enhance it as a public amenity and signage will help educate the wider public of the benefits of native plants and supporting pollinators.

How many people will benefit from the project or program? 500 Percentage of Greater Victoria Residents? 1%

What target audience will benefit? neighbourhood residents, gardeners, users of Spirit Gardens, commuters, school groups





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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1000 Amount Requested \$ 500  
How much is the organization contributing? \$ 500

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: July 2020 Expected Completion Date: June 2021

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 6-10 Total volunteer hours: 25 hours  
Can the project or program occur without volunteer support? ☐ Yes ☒ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website                      | <input type="checkbox"/> Newspaper advertisement  |
| <input type="checkbox"/> Social media                            | <input checked="" type="checkbox"/> Newsletter    |
| <input type="checkbox"/> Sponsor plaque                          | <input checked="" type="checkbox"/> Annual Report |
| <input checked="" type="checkbox"/> Other <u>Public Meetings</u> |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
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- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

Signature of individual

Janis Van de Geer

Name

Signature of authorized officer of support organization

Janis Van de Geer

Name

Garden Coordinator

Relationship to support organization (if applicable)

March 2, 2020

Date

Board of Directors

Position

March 2, 2020

Date



Finance  
1 Centennial Square  
Victoria, BC V8W 1P6

T 250.361.0245  
E [grants@victoria.ca](mailto:grants@victoria.ca)  
[victoria.ca](http://victoria.ca)

# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: Oaklands Community Association Telephone: 250-370-9101 ext. 4  
Mailing Address: 1-2827 Belmont Ave, Victoria, BC, V8R 4B2 Email: community@oaklandsca.com

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: Oaklands Community Association  
Mailing Address: 1-2827 Belmont Ave, Victoria, BC, V8R 4B2  
Contact Person: cSarah Murray Email: community@oaklandsca.com Telephone: 250-370-9101 ext 4  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: 882929946RR0001

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Oswald Park Community Garden - Work Party  
Project or program location: Oswald Park

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☐ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

The funds from the Micro Grant will be used towards purchasing program supplies for the seasonal workshops, garden tours, and/or work parties held at the Oswald Park Community Garden. The workshops and work parties will be organized by the Volunteer Coordinator with the support of the OCA (Community Development Coordinator). These funds will help provide honourarium to Indigenous experts, and to purchase food and activity supplies to ensure that all of the garden events remain free and accessible to all City of Victoria residents. We

How many people will benefit from the project or program? 7120 Percentage of Greater Victoria Residents? 2%

What target audience will benefit? residents and visitors of Oaklands, families, youth, seniors



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1000 Amount Requested \$ 500  
How much is the organization contributing? \$ 500

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: May 2020 Expected Completion Date: April 2021

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 15 Total volunteer hours: 500  
Can the project or program occur without volunteer support? ☒ Yes ☐ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website      | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media | <input checked="" type="checkbox"/> Newsletter    |
| <input type="checkbox"/> Sponsor plaque          | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Other _____             |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

- I/We will be in compliance with all applicable municipal policies and bylaws
- I/We organization will publicly acknowledge the grant awarded by the City (if applicable)
- We are in good standing with either: (1) the Province of BC as a registered Society or (2) the Canada Revenue Agency as a registered Charity
- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

Signature of individual  
Sarah Murray

Name

Signature of authorized officer of support organization  
Chris Holt

Name

Community Development Coordinator

Relationship to support organization (if applicable)  
January 22, 2020

Date

Executive Director

Position

January 23, 2020

Date



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1 Centennial Square  
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# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: Quadra Village Community Centre Telephone: (250) 388-7696  
Mailing Address: 901 Kings Road, Victoria, BC V8T 1W5 Email: quadravillage.gardens@gmail.co

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_ Telephone: \_\_\_\_\_  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: S-0010895

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Revitalization of Wark Street Commons  
Project or program location: Wark Street Commons Community Garden

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

A transition was made in May 2019 to a new Garden Coordinator, Jennifer Lotz, who is now responsible for the volunteer coordination and maintenance of Wark Street Commons and the People's Apothecary gardens, both located in Quadra Village. A rejuvenation of the Wark Street Commons garden has taken place in this time frame, with the implementation of educational plant signage (plant name, botanical name, when/what to harvest) as well as a welcome sign. Additionally, a large portion of the garden has been transitioned to a native pollinator plant garden, using edible and medicinal native plants that will attract pollinators (needed for local food security), increase urban biodiversity, as well as increase knowledge of indigenous plants and food systems that existed here before colonization. As part of this on-going revitalization of this community space, we seek to improve garden borders by implementing natural edging materials such as river rock and other natural elements (wood, driftwood). This will allow for an edge to be created, without the harshness of putting up a fence, with the intention of enhancing public awareness of the space as an area that should not be walked on. Further, we are seeking funds to enhance the existing irrigation system at the garden by converting the current system to drip irrigation and installing a timer. The current system requires the Garden Coordinator to be on site to water frequently during the dry summer months (or rely on volunteers to do the watering, which is not always consistent). An improved irrigation system will improve the health of all species in the garden, as well as allow the Garden Coordinator to spend her time on other important garden activities. Lastly, we are hoping to build one small raised planter bed (approx. 3'x5'x3') in the SW corner of the garden by the entrance arbor. We believe more food will be consumed from the garden if we include an area where food is grown above ground, away from potential sources of contamination (dog feces/urine, etc.). We already have confirmed professional volunteer labour from a horticulture/permaculture technician as well as from a skilled carpenter in order to properly implement all aspects of the project. Learning activities associated with these projects will be presented and offered to the community as hands-on learning opportunities.

How many people will benefit from the project or program? ~10,295 Percentage of Greater Victoria Residents? 2.5%

What target audience will benefit? People with an interest in urban food production, local food security, and community building.



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1000 Amount Requested \$ 500  
How much is the organization contributing? \$ 500

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: April 2020 Expected Completion Date: December 2020 (at the latest)

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? ~8 (confirmed) Total volunteer hours: 64  
Can the project or program occur without volunteer support? ☐ Yes ☒ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |  |
|--|--|
| <input checked="" type="checkbox"/> Website      | <input type="checkbox"/> Newspaper advertisement |
| <input checked="" type="checkbox"/> Social media | <input type="checkbox"/> Newsletter              |
| <input type="checkbox"/> Sponsor plaque          | <input type="checkbox"/> Annual Report           |
| <input type="checkbox"/> Other _____             |  |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

- I/We will be in compliance with all applicable municipal policies and bylaws
- I/We organization will publicly acknowledge the grant awarded by the City (if applicable)
- We are in good standing with either: (1) the Province of BC as a registered Society or (2) the Canada Revenue Agency as a registered Charity
- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

Signature of individual

Relationship to support organization (if applicable)

Name

*Jennifer Lotz*

Date

Garden Coordinator

Signature of authorized officer of support organization

Position

Jennifer Lotz

January 24, 2020

Name

Date



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# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: Saanich Legacy Foundation Telephone: 778-4032411  
Mailing Address: PO Box 48204 Email: \_\_\_\_\_

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: Chinese Community Services Centre of Victoria  
Mailing Address: 655A Herald Street, Victoria, BC V8W 1R5  
Contact Person: Nora Butz Email: admin@ccscvictoria.ca Telephone: 250 889-8329  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: 868879149RR00

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: Chinatown Garden  
Project or program location: 655A Herald Street, Victoria Office Front

Which guidelines does this project or program fall under? ☒ Boulevard Gardening Guidelines ☐ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

We plan to create a Boulevard Garden in front of the Chinese Community Services Centre (CCSC). This is envisioned to transform the appearance of the CCSC and provide a welcoming green space to the CCSC. Since there is no dirt boulevard at 655 Herald Street we plan to build container boxes for our plantings of flowers, Chinese greens and vegetables.

The project will engage many of CCSC members, volunteers, family and friends to plan, plant and tend to the garden. It will be a very creative and productive way of engaging community and sharing the fruits (vegetables and flowers) of our labours.

Research and education is being done on ways to build planter soils, choose attractive, bee-friendly flowers, Chinese leafy greens, perennial and root vegetables to bloom into a productive garden. We will optimize the garden space and containers with trellises, poles and stakes to support growth and train plants vertically. Daily hand watering, weeding and tending to plantings will be done by conscientious daily volunteers.

This garden project is to engage many experienced community gardeners, teach and learn about growing food and flowers, and ultimately create and produce a bountiful harvest to share.

We are conscientious caretakers and will work within structure and maintenance guidelines within the Boulevard Gardening Guidelines to grow a vibrant Garden in Victoria's Chinatown.

How many people will benefit from the project or program? 100- 150 Percentage of Greater Victoria Residents? 5 %

What target audience will benefit? Chinese Community members, family, friends, neighbours and Victoria Community at large



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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 1000 Amount Requested \$ 500  
How much is the organization contributing? \$ 500

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: 1 April 2020 Expected Completion Date: 30 November 2020

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 40 Total volunteer hours: 400  
Can the project or program occur without volunteer support? ☒ Yes ☐ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |  |   |
|--|---|
| <input checked="" type="checkbox"/> Website      | <input type="checkbox"/> Newspaper advertisement  |
| <input checked="" type="checkbox"/> Social media | <input type="checkbox"/> Newsletter               |
| <input type="checkbox"/> Sponsor plaque          | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Other _____             |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.

I agree to the following terms:

- I/We will be in compliance with all applicable municipal policies and bylaws
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- We are in good standing with either: (1) the Province of BC as a registered Society or (2) the Canada Revenue Agency as a registered Charity
- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

Nora Buta  
Signature of individual

NORA BUTA  
Name

GILBERT CHEUNG  
Signature of authorized officer of support organization

GILBERT CHEUNG  
Name

Secretary / Board member  
Relationship to support organization (if applicable)

Jan 29, 2020  
Date

President  
Position

Jan 29, 2020  
Date





Finance  
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# Micro Grant Application Form

## HOW TO APPLY:

Complete **Application Form** in its entirety and send to [grants@victoria.ca](mailto:grants@victoria.ca)

## SECTION 1. CONTACT INFORMATION

Individual or Organization Name: **Vic West Food Security Collective** Telephone: 250-686-0856  
Mailing Address: **521 Craigflower Road Victoria V9A 6Z5** Email: **vicwestgarden@yahoo.ca**

## SECTION 2. PARTNERSHIP ORGANIZATION INFORMATION (IF APPLICABLE)

Organization Name: **Victoria West Community Association**  
Mailing Address: **Victoria West Community Association**  
Contact Person: **Justine Semmens** Email: **president@victoriawest.ca** Telephone: \_\_\_\_\_  
Registered under the *Society Act* or registered Charity? ☒ Yes ☐ No Society/Charity Registration Number: **S-0008974**

## SECTION 3. PROJECT OR PROGRAM INFORMATION

Project or program title: **Vic West Gardens Volunteer Refreshment Kit**  
Project or program location: **Banfield Park Community Orchard and Banfield Commons**

Which guidelines does this project or program fall under? ☐ Boulevard Gardening Guidelines ☒ Community Garden Policy

Is this project or program in compliance the Boulevard Gardening Guidelines or Community Garden Policy? ☒ Yes ☐ No

Description of the project or program, why the grant is needed, and how it aligns with or supports the **enhancement and steward of public spaces, green spaces, and food systems** strategic plan objective.

Banfield Park Community Orchard and Banfield Commons are community gardens in a City park which serve to support local food production, increase public access to healthy local food and engage community participation. The gardens diversify Banfield Park's use, enhance nature ecosystems, and provide public gathering space and educational opportunities.

The gardens are maintained by volunteers at monthly work parties. Work breaks are taken to provide volunteers rest and time to socialize. Refreshments are always provided during the breaks to re-energize and reward the volunteers, and to create a sharing culture. Hot or cold herbal tea brewed from the garden are served along with other healthy snacks. Fry's Bakery across the street donates pizza if the work party is on a Sunday. The Victoria West Community Association will provide \$20 per work party for purchasing the refreshments.

The grant will support the purchase of a refreshment serving kit that will include a portable table, dishes, thermos, portable storage bin and napkins. The kit will be stored in the garden tool shed for easy access. Currently the garden Coordinators supply personal serving items from their home kitchens.

How many people will benefit from the project or program? **all park visitor** Percentage of Greater Victoria Residents? **100** %

What target audience will benefit? **The gardens are in a public park so the general public will benefit.**





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## Micro Grant Application Form

### SECTION 4. PROJECT OR PROGRAM FINANCIAL INFORMATION

What is the project or program: Total Cost \$ 540 Amount Requested \$ 340  
How much is the organization contributing? \$ 200

### SECTION 5. PROJECT OR PROGRAM TIMELINE

Start Date: April 2020 Expected Completion Date: March 2021

### SECTION 6. PROJECT OR PROGRAM VOLUNTEERING

How many volunteers will work on this project or program? 140 Total volunteer hours: 460  
Can the project or program occur without volunteer support? ☐ Yes ☒ No

### SECTION 7. PUBLIC ACKNOWLEDGEMENT

All grant recipients are required to publicly acknowledge the grant. How do you or the support organization plan on publicly acknowledging the City's funding support?

- |   |   |
|---|---|
| <input type="checkbox"/> Website        | <input type="checkbox"/> Newspaper advertisement  |
| <input type="checkbox"/> Social media   | <input checked="" type="checkbox"/> Newsletter    |
| <input type="checkbox"/> Sponsor plaque | <input checked="" type="checkbox"/> Annual Report |
| <input type="checkbox"/> Other _____    |   |

### SECTION 8. DECLARATION

I am an authorized signing officer of the organization and I certify that the information given in this application is correct.  
I agree to the following terms:

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- We are not in arrears with the City of Victoria
- We are not in bankruptcy or seeking creditor protection
- The grant application meets all the eligibility requirements of the City's Grant Policy and related Grant Category Addendum

Signature of individual

**Justine Semmens**

Name

**President, Victoria West Community Association**

Relationship to support organization (if applicable)

**January 28, 2020**

Date

Signature of authorized officer of support organization

Position

Name

Date