

Due to grants@victoria.ca November 23<sup>rd</sup> 4pm 2020

### 1. PROJECT TITLE

2.	CONTACT INFORMATION
	□ Not-for-Profit Organization, or
	☐ Informal Group (not registered as a not-for-profit organization)  If you're applying as an informal group, please include a letter of support from a registered not-for-profit organization
3.	PROJECT LEAD
	Contact Name
	Organization Name (if applicable)
	Mailing Address
	Telephone
	Email
4.	PARTNERING NOT-FOR-PROFIT GROUP
	Society Registration Number
	Organization Name
	Contact Name
	Mailing Address
	Telephone
	Email:
5.	PROJECT DESCRIPTION
	Please describe your proposed project
6	COMMUNITY INVOLVEMENT

How will your proposed project involve the community before, during and following implementation?

### 7. BENEFITS

How will your proposed project benefit the community?



8.	<ul><li>inclusion</li><li>a) Are there opportunities for your proposed project to support equity and inclusion in the community?</li></ul>
	b) Are there ways this project might reduce barriers or improve accessibility for people with disabilities?
9.	APPROVALS  What approvals and/or other regulatory requirements must be met to complete your project? (e.g. property owner
	permission, Heritage Alteration Permit, complying with city permitting processes and bylaws etc.)
10.	<b>LIABILITY</b> Are there aspects of your project that present risk to people or property during the activity? How will risk be managed? (e.g. insurance)
	managea. (e.g. moaranee)
11	PROJECT TIMELINE (Projects must be completed within two weeks of receiving funds)
11.	
	Start date
	Completion date
12.	PROJECT LOCATION (If it is a mobile project or service please describe the proposed locations for service delivery and the
	proposed schedule for service delivery at different locations)
13.	WORKPLAN SCHEDULE (Please add more lines if necessary)
	,,,

Date	Milestone
	City of Victoria   EMERGENCY SOCIAL SERVICE GRANT



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14.	PROJECT COST Please complete following budget Include all rates and duties for labour hours	
	What is the <b>total cost</b> of the proposed project (including in kind labour and donations)? \$	_
	Amount requested from the Emergency Social Service grant: \$	
	Your total matching contribution \$	
Iten	ns Funded by Grant	Amount
ГОТА	AL REQUESTED	\$
Iten	ns Provided by Applicant	Amount

\$



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#### **DECLARATION**

I certify that the information given in this application is correct. I agree to the following terms:

- 1. The not-for-profit organization is not in arrears with the City.
- 2. The Project will be carried out when and as described in the application. If there are significant changes to the Project or it is not completed, I am responsible to notify the City of Victoria of any changes and I am required to return the funds back to the City of Victoria.
- 3. I assume all liability for activities associated with implementation.
- 4. The Project or Activity must comply with all applicable municipal policies, bylaws and requirements of the City of Victoria respecting use of City property.
- 5. A final report conforming to the format on the last page of this application will be submitted.
- 6. I provide the City of Victoria permission to share my name and details of this application to outside organizations for the purpose of determining funds from those organizations for the project.
- 7. I acknowledge that information contained in this application will become a matter for the public record and is subject to disclosure under the Municipal Freedom of Information and Protection of Privacy Act.

Date	
Applic	cant Group/Resident Lead Name
Signat	ture(s)
IST OF	- ATTACHMENTS
	Design information, including site map and visuals of Project or Activity location
	If the application is not from a registered not-for-profit organization, a letter from a not-for-profit partner indicating their support for the project needs to accompany the application. If the applicant is successful, the grant payment will be made to the not-for-profit organization to administer and disburse funds to the group they are supporting.