

Community Organizations Grant Application

(See ADM-25 Community Organizations Grants & Loans Policy)

Organization Name: _	
Mailing Address: _	
Primary Contact:	
Name: _	
Email: _	
Society or Charity Reg	gistration Number:
Year incorporated or	registered:

Which community sector is your organization involved in?
 □ Arts □ Community Spirit □ Culture □ Environment □ Heritage □ Recreation and Leisure □ Tourism
**Attach additional documentation if necessary to answer questions below.
Provide a brief description of your organization and the services that they provide to the community.
Explain the organization's capabilities to plan and manage the project (i.e. past experience, volunteer support, and financial stability).

Name of Project:
Estimated Start Date:
Estimated Completion Date:
Please explain how this project will benefit the community.
How much funding is being requested for the project?
Is the organization requesting any in-kind support from the County? If so, to what extent?
Has the organization contacted other community organizations or groups to form a partnership for this project or event? If so, which organizations are you partnering with?

The undersigned is duly authorized to make this application and verifies that the information provided in this application and supporting documents is true and accurate and endorsed by the organization.

Name (please print):	Signature:
Position with organization:	Date:
<u>Appli</u>	cation Checklist
 □ Completed application form □ List of executives with names □ Copy of organization's financial □ Proof of Insurance 	and phone numbers al statements for previous fiscal year
☐ Contractor estimates or suppl☐ Additional information regard	ier quotes ling the project that will aid the County is
assessing the application	