

Appendix 2 – Grant Application Form 2 (General)

Primary Contact	Name:	Role/Title:
	Email:	Phone:
Organization Name		
Organization Address		
Organization Type	□ Non-Profit □ Charity □ Con	npany D Other (describe below)
Organization	Briefly describe your organization.	
Description		
Tax ID or		
Registered Charity #		
Support (Financial)	What is the <u>total</u> amount of funding that you request?	
	\$	
Support (In-Kind)	What are the types of in-kind support th	at you request?
Date	What is the date by which you require th	e funds?
Period	Date range within which you will <u>use</u> the grant funds.	
	Start Date: En	d Date:



Purpose	Briefly tell us about your event, initiative, or project, and why you are requesting funding from the municipality.
Expenses	What is the <u>total</u> cost of planned expenses? How do you intend to use the municipal grant funds to cover these expenses (in whole or part)?
Revenues	What is the <u>total</u> amount of revenue you expect to raise and how you will use that revenue? For example, to pay for services, supplies, wages, equipment, etc.
Other Funding	Have you applied for or received funding from other governments (municipal, provincial, or federal) or non-profit organizations? If yes, please explain.



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Benefit to Residents	How will Hartland residents benefit from your event, initiative, or project? For example, how many residents are expected to participate?
Benefit to Community	How will the town of Hartland benefit from your event, initiative, or project? For example, will Hartland see an increase in retail activity, tourism, etc.?
Impact on Services	Will your event, initiative, or project increase the quality and/or availability of services for Hartland residents? For example, will residents receive a new service or a better service, or more services?
Time Period	Will your event, initiative, or project take place one time and for a limited period or will it take place again in the future, for example, several times or on an ongoing basis?
Date	
Signature	