

MCLEOD LAKE MACKENZIE COMMUNITY FOREST



MLMCF FUNDING APPLICATION:

Project Application Name / Title:		
Date Submitted:		
Proponent Name <i>(legal name)</i> :		
Brief Description of the Proponent <i>(describe the organization requesting funding)</i> :		
Proponent Address (mailing address, email, phone #):		
Non-profit Society Registration # <i>(if applicable)</i> :		
Proponent Contact(s) Names:	Phone #:	Email:
<u>Project Description</u> <i>(what is it, what will be done, include timelines)</i> :		
<u>Rationale for the Project</u> <i>(why it is necessary)</i> :		
<u>Project Location</u> <i>(where it is)</i> :		

Outcome (Describe the anticipated result or outcome of this project. Who or what will benefit):

Describe how the funding will be used (*budget*): Total requested: ___\$_____

- 1.
- 2.
- 3.

Multi-year funding is permissible but must be described; Identify Milestones where applicable

Describe how this request meets the MLMCF's "Funding Eligibility Criteria" (*the MLMCF's Funding Policy is available from the General Manager or the Administrator*):

Have letters of support, or documentation of need, been included?

Are there other contributors to this project? (*Partnerships, Funds raised elsewhere, In-kind contributions*)

The MLMCF may request certain additional information in order to better evaluate this application.

Where the Board determines it to be necessary, successful applicants may be required to:

- a) enter into an agreement with the MLMCF governing the management and delivery of the project;
- b) comply with minimum insurance requirements and provide a copy of Work Safe BC Registration, Commercial General Liability Insurance and vehicle insurance prior to finalizing an agreement;
- c) add the MLMCF as an additional insured to the applicant's Commercial General Liability Policy in respect of covered liability arising out of Recipient's Project work; and
- d) provide Progress Reports, Payment Schedules and a Wrap-up Report on how the funds were expended and what benefits were achieved.

I have read and understand the MLMCF's Funding Policy.

I confirm that the information in this application is accurate and complete, and that the project proposal, including plans and budgets, is fairly presented.

I agree that once funding is approved, any change to the project proposal will require prior approval of McLeod Lake Mackenzie Community Forest (MLMCF).

I also agree to submit reporting materials as required by the MLMCF, and where required, financial accounting for evaluation of the activity funded by the MLMCF.

I understand that the information provided in this application may be accessible under the Freedom of Information (FOI) Act.

I agree to publicly acknowledge funding and assistance by the MLMCF.

I authorize the MLMCF to make enquiries, collect and share information with such persons, firms, corporations, federal and provincial government agencies/departments and non-profit organizations, as the MLMCF deems necessary for decision, administration, and monitoring purposes for this project.

I agree that information provided in this application may be shared with the appropriate Directors, MLMCF staff, and consultants.

Name:

Organization signing authority

Title:

Date:

APPLICATIONS MUST BE RECEIVED BY THE MLMCF NO LATER THAN 4:00 PM ON TUESDAY JANUARY 31, 2017.

THEY CAN BE EMAILED TO GENERALMANAGER@MLMCF.CA AND/OR ADMIN@MLMCF.CA

**OR MAILED TO: MCLEOD LAKE MACKENZIE COMMUNITY FOREST
 PO BOX 579
 MACKENZIE, BC
 V0J 2C0**

OR THEY CAN BE DELIVERED TO:

- 1. JIM ATKINSON AT 407 STUART DRIVE**
- 2. THE ATTENTION OF DEB HALE AT THE CHAMBER OF COMMERCE OFFICE AT 88 CENTENNILA DRIVE**