

**Region of Queens Municipality
Recreation and Community Facilities Department**

**Facility Development Assistance Grant – Major Category
Application Form**

_____ Improvement of existing facility _____ New Facility Single
_____ New Activity Area/Existing Facility _____ New Facility Complex

Name of Organization Applying:

Contacts: (1) _____

(2) _____

Facility Description:

Please provide a complete description of work proposed in this application:

Civic Address of Facility: _____

Please indicate the proposed work schedule for your project, including firm start and finish dates:

Estimated Costs for Project:	Materials	Labour
Site Work (excavation, drainage, etc.)	_____	_____
Concrete Work (foundations, walls, etc.)	_____	_____
Lumber (joists, studs, etc., including plywood)	_____	_____
Steel	_____	_____
Electrical	_____	_____
Plumbing	_____	_____

Heating	_____	_____
Landscaping (sodding, asphalt, fencing, etc.)	_____	_____
Equipment (nets, backstops, lights, etc.)	_____	_____
Regulated extras (doorways, sprinklers, sinks)	_____	_____
Fire Marshal Upgrades	_____	_____
Other (Please specify):	_____	_____
Totals:	_____	_____

Sources of Funds for this Project:

	Materials	Labour
Federal:	_____	_____
Provincial:	_____	_____
Loans :	_____	_____
In-kind services:	_____	_____
Fund-Raising:	_____	_____
Other:	_____	_____
Summary:		
Total Estimated Cost:		_____
Applicant's Contribution:		_____
Request – Recreation/Community Facilities Committee		_____

If for an existing facility indicate the current level of activity, including the type of use and number of users on a seasonal or annual basis:

Please provide any additional comments in the following space to elaborate on the need that this application will meet:

Please attach a copy of the most recent financial statement (preferably audited) for your organization.

The undersigned agree and understand that the facility mentioned in this application will be made available for use by the general public.

Two Signatures:

Signed: _____

Signed: _____

Position: _____

Position: _____

Date: _____

Date: _____

Mailing Address:

Mailing Address:

Phone: _____

Phone: _____

Email Contact: _____

Email Contact: _____
