THE MUNICIPALITY OF THE COUNTY OF RICHMOND
LA MUNICIPALITÉ DU COMTÉ DE

Appendix C – Community Grant Tier 2 Application Form

Maximum Request: $7,500.00

Name of the Organization:			
Applicant Name and Title of Representative			
Civic Address:			
Contact Number:		Email:	
Form of Organization:		☐ Not-for-Profit Organization ☐ Charitable Organization	
Registry of Joint Stocks file number or Charitable Organization number:			
If you are neither a not-for-profit nor a charitable organization and are being sponsored by an eligible host organization, please provide the host organization's information and contact details below. Please note that the Municipality will pay the approved grant funds to the host organization.			
Host Contact Information			
Host Organization:			
Applicant Name and Title of Representative:			
Civic Address:			
Contact Number:		Email:	
Host Form of Organization:		☐ Not-for-Profit Organization ☐ Charitable Organization	
Host's Registry of Joint Stocks file number or Charitable Organization number:			
Sum Requested:			
Purpose of Funding Request: (Use additional pages if required.)			

THE MUNICIPALITY OF THE COUNTY OF RICHMOND
LA MUNICIPALITÉ DU COMTÉ DE RICHMOND

Appendix C – Community Grant Tier 2 Application Form

Maximum Request: $7,500.00

Project Budget			
Cost of the Project		Financing the Project	
Capital Cost		Stakeholder Equity:	
Land:		Stakeholder Loan:	
Land Improvements:		Funding Agency	
Materials:		Provincial:	
Labour Costs:		Federal:	
Other Capital Costs:		MOCR (County):	
Other - Specify:		Other – Specify:	
Other – Specify:		Other – Specify:	
Total:		Total:	

Required Attachments
☐ Registry of Joint Stocks file number (include list of directors), Charitable Organization number or proof of organizational status
☐ Proof of ownership/lease/authorization to facility
☐ Balance Sheet (sample attached)
☐ Income Statement for the previous fiscal year (sample attached)

Applicants must provide source of Funds for Stakeholder Equity and Stakeholder Loan.

Please forward your applications to grants@richmondcounty.ca

THE MUNICIPALITY OF THE COUNTY OF RICHMOND
LA MUNICIPALITÉ DU COMTÉ DE

Municipal Grant Financial Report Templates

BALANCE SHEET FOR:

_____

(Name of organization)

For the fiscal period ending

_____

(yyyy/mm/dd)

Assets:	
Current Assets	
Cash and deposits	_____
Accounts receivable	_____
Prepaid expenses	_____
Capital/Fixed Assets	
Equipment	_____
Land and buildings	_____
Other capital/fixed Assets	_____
A. Total Assets	_____
Liabilities	
Current liabilities	
Accounts payable	_____
Taxes Payable	_____
Long Term Debt	_____
Mortgage	_____
Other	_____
B. Total Liabilities	_____
Equity	
Retained earnings/deficit	_____
General reserve	_____
C. Total Equity	_____
Total Liabilities and Equity (A must equal B + C)	

THE MUNICIPALITY OF THE COUNTY OF RICHMOND
LA MUNICIPALITÉ DU COMTÉ DE

Municipal Grant Financial Report Templates

STATEMENT OF INCOME AND EXPENDITURES FOR:

_____

(Name of society)

For the fiscal period ending

_____

(yyyy/mm/dd)

Income:

Membership fees	_____
Fund raising	_____
Other revenue	_____
Other revenue	_____
A. Total Income	_____

Expenditures

Administration	_____
Education and Training	_____
Insurance	_____
Professional fees	_____
Salaries	_____
Other expenditures	_____
Other expenditures	_____
B. Total Expenditures	_____

C. Net Surplus or (Deficit) (A-B=C) _____

D. Surplus or (Deficit), beginning of year _____

E. Surplus or (Deficit), end of year (C + D = E) _____