## **CAPITAL GRANTS AND LARGE PROJECT**

## **APPLICATION FORM**

Please refer to the Capital Grant Information sheet and follow that information when completing **ALL** pages of the application form, adding additional pages if necessary.

**Please note**: Applications submitted with missing or incomplete information will not considered for approval until the missing / incomplete components of the application have been fully completed and submitted. Fully complete applications received by the deadline will be allotted available funding first, other applications will only be considered for approval and funding should funds be available.

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| **Application deadlines:**  Capital Grants: September 30 and May 30  Large Project >$10,000: accepted **throughout year**, however must be submitted at least 3 months prior to proposed commencement date and **30 days prior to grant deadline, for large project approvals,** if also applying for capital grant. | **Send Application to:**  Provincial Properties Committee  Girl Guides of Canada-BC Council  Email: BC-propertiesgrants@girlguides.ca |

This is an application for: **Large Project**  **Capital Grant**  (please check one or both as appropriate)

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| **PROJECT NAME** | Enter text | | | | | | | | | | | | |
| **AREA** | Enter text | | | | | | | | | | | | |
| PROPERTY NAME  and physical address of property: | | | | | Enter text | | | | | | | | |
| Campsite or building name: | | | | | Enter text | | | | | | | | |
| Status of property: | | Owned by Girl Guides of Canada | | | | | Leased by Girl Guides of Canada | | | | | | |
| Leased from: | | | | | Enter text | | Expiry date: | | | | Enter text | | |
| License of occupation: | | | | | Enter text | | Expiry date: | | | | Enter text | | |
| Other: | | | | | Enter text | | Expiry date: | | | | Enter text | | |
| Renewal option: | | | | | Enter text | | | | | | | | |
| Age of the building/structure (if applicable) | | | | | | | Enter text | | | | | | |
| **ANNUAL CAMPSITE/BUILDING USAGE** | | | | | | | | | | | | | |
| Primary use of the property: | | | Enter text | | | | | | | | | | |
| Other uses: | | | Enter text | | | | | | | | | | |
| # of bed nights per year: | | | Enter text | | | # of person days per year (day use only) | | | | | | Enter text | |
| Is the property used year-round? | | | | | | Yes  No | | | | | |  | |
| If a campsite, in last calendar year: | | | | How many residential camps? | | | | Enter text | | Tent camps? | | Enter text | |
| Is the property used for non-Guiding events?  Yes  No | | | | | | | | | What percentage of total use? | | | | Enter text % |

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| **PROJECT DETAILS** | | | |
| Outline the purpose and benefits of this project | | | |
| Enter text | | | |
| Provide a description of the project (please use additional paper if necessary and attach sketches, photos, campsite map or other helpful information) | | | |
| Enter text | | | |
| Provide name of Contractor chosen; including their credentials and rationale for choice | | | |
| Enter text | | | |
| Planned project start date: | Enter text | Planned completion date: | Enter text |

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| **BUDGET** | | | |
| **SOURCES OF FUNDING**  (must cover 100% of total project costs, and exclude BC Council grant) | | | |
| Cash on hand designated for project: | Enter text | | |
| **Anticipated revenues** | | | |
| Donations/Community grants: | Enter text | Source: | Enter text |
| Assessment: | Enter text | Source: | Enter text |
| Fundraising: | Enter text | Source: | Enter text |
| **TOTAL FUNDING:** | Enter text | | |
| **Projected project costs** | | | |
| Labour: | | Enter text | |
| Materials, permits and other: | | Enter text | |
| **7 %** PST: | | Enter text | |
| **50% of 5% GST:** | | Enter text | |
| SUBTOTAL: | | Enter text | |
| 15% contingency: | | Enter text | |
| **TOTAL COST:** | | Enter text | |

**The following items are an integral part of the application and must be included. Please submit (and check off) the following items:**

**For all projects:**

* Operating budget of the property for the year the project will be undertaken, including budget for specific project
* Real Property Management Plan for at least a five-year period (must include current year)
* Three estimates (or letter explaining why you have not included three)

Note: Financial statements are no longer required, however the Area must provide written confirmation on the last page of this application that 100% of the funding for this project is available.

**Additions items to be submitted for large projects only:**

* A site map, showing location of project site
* A short statement of the purpose for the building, renovation, or other development
* Three years of annual camping statistics (eg. number of camps and campers)

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| Amount requested from BC Council (Lessor of 50% of total projected cost or $15,000): | $ Enter text |
| Date of Application: | Enter text |

Each application must be approved by the local site or property committee as well as the Commissioners responsible for the property and Area Commissioners, as appropriate.

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| **Project chairperson** | |
| Enter text |  |
| *Name* | *Signature* |
| Enter text | Enter text |
| *E-mail address* | *iMIS number* |

**AREA REPRESENTATIVE CONFIRMATION OF APPROVAL AND AVAILABLE FUNDING**

As representative(s) for the Area council(s) responsible for the property applying to this Capital Grant and/or Large Project Application, I(we) confirm that this application has been reviewed and accepted by the Area. Further I(we) confirm that the Area is aware that the possible grant support from Girl Guides of Canada – BC Council will be the lessor of 50% of the total projected cost of the project, as per the budget included with in this application, or $15,000.

In lieu of submitting current financial statements for the Area, I(we) confirm that Area has sufficient funds available, and budgeted, to support the full cost of this project.

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| **Commissioners of Area councils responsible for property** | | |
| Enter text | Enter text |  |
| *Name* | *iMIS number* | *Signature* |
| Enter text | | Enter text |
| *Email Address* | | *Council name* |
| Enter text | Enter text |  |
| *Name* | *iMIS number* | *Signature* |
| Enter text | | Enter text |
| *Email Address* | | *Council name* |

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| **Office Use Only** | | | |
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| Date received by Properties Committee: | Enter text | Date approved by  Properties Committee: | Enter text |
| Date verified complete by Properties Committee: | Enter text | Date approved by BC Council (for large projects) | Enter text |