



DISCRETIONARY GRANT & FEE WAIVER APPLICATION

Prior to completing this form, please review all eligibility details outlined in the Discretionary Grant Policy.

Type of Request

Form section for 'Waiver of fees' with fields for Name of the event, Hall / Facility, and Date(s).

Form section for 'Financial Support' with fields for Name of the project, Length of project, and Total amount of funds requested.

Applicant Information

Form section for Applicant Information with fields for Name of Applicant, Organization or Group, and registration status questions.

Form section for Mailing Address, Phone number(s), and Email address(es).

Purpose and Eligibility

Provide a brief description of the purpose of your request.

Describe how the community will benefit from your initiative. Please include age range, population segment, and number of residents expected to benefit from the project or event.

Please briefly describe how your project aligns with [Council's Term Plan](#) objectives.

What measures have you, or will you put in place to make your organization more financially sustainable?

Have you or your organization applied for funds or waiver of fees from this Council in the last two years?

Yes No

If yes, for what purpose or project?

What was the waived fee or amount received?

Supporting Documentation

For requests exceeding \$5,000, please attach a proposed budget for this initiative and last year's financial statements.

Please write or attach a list all current executive members of the organization. *Be sure to have each person's consent to share their name*



Acknowledgement and Consent

- I have read the Discretionary Grant Policy of the Municipality of West Nipissing.
- I accept responsibility for provision of all required details and documents included in this application. I understand that if the grant is awarded, follow-up reports may be required, and that failure to provide reports could result in annulled disbursements.
- I acknowledge the privacy statement below.

Council meetings are recorded in video and audio format and are subject to media broadcast. Personal information on this form will be used for the purpose of sending correspondence relating to matters before Council and Committee of the Whole. Your name, contact information, comments, and any other personal information, is collected and maintained for the purpose of creating a report that is available to the general public pursuant to Section 27 of the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, C.M 56, as amended.

Date

Signature

Name of parent or guardian (if applicant is under 18)

Signature

Please submit your completed application form to finance@westnipissing.ca
For more information, you may reach the Municipal office at 705-753-2250.