



MUNICIPAL TRAILS GRANT APPLICATION FORM FISCAL 2023/2024

INSTRUCTIONS

- Application deadline is March 31st, 2024.
- Please submit application including all supportive documentation prior to deadline. Incomplete applications will not be considered for funding. Further information may be requested as required.
- If you do not have enough space to answer a question, please attach a separate sheet.
- Please refer to the Municipality's Municipal Grant Policy available on www.victoriacounty.com or by contacting the Municipality at 902-295-3659
- Return completed applications in person, by mail or by email to:

TRAILS PROJECT TEAM
 Municipality of the Victoria County
 P.O. Box 370
 495 Chebucto Street
 Baddeck, NS B0E1B0
Steff.macleod@countyvictoria.ns.ca

APPLICATION CHECKLIST

<input type="checkbox"/>	A signed copy of the completed trails grant application form
<input type="checkbox"/>	Most recent financial statements or Treasurer's report
<input type="checkbox"/>	Proof of current registration as a non-profit or charitable organization
<input type="checkbox"/>	<i>New Trail Development grants only:</i> Letter of support from municipal staff member
<input type="checkbox"/>	<i>Maintenance or Repair grants only:</i> Quote(s) for capital improvement or equipment purchase
<input type="checkbox"/>	<i>Marketing grants only:</i> Annual operating budget for fiscal 2021-2022

PART 1 - APPLICANT INFORMATION

Community organization (applicant):							
NS Registry of Joint Stocks Number:							
Contact name:				Title:			
Mailing address:				Phone:			
				Email:			



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PART 2 – APPLICATION TYPE (select one)	
<input type="checkbox"/>	<p>Development - To provide one time financial support to fund or provide initial seed funding for a new project that enhances and supports the Municipal Trails Strategy. <i>Cannot exceed 15% of the total project cost.</i> <i>Maximum amount eligible to request is \$10,000.</i></p>
<input type="checkbox"/>	<p>Trail Maintenance / Repair - To provide one-time support for the required repair of section of an existing trail or to execute a portion of planned trail maintenance project. <i>Cannot exceed one-third (1/3) of the total project cost.</i> <i>Maximum amount eligible to request is \$3,000.</i></p>
<input type="checkbox"/>	<p>Marketing - To provide grants to community organizations that have a mandate to market and promote the use of a trail as part of the Municipal Trails Strategy. This funding is intended to focus on marketing through maps and website or digital content to assist in the user experience of being on the trail. <i>Maximum amount eligible to request is \$2,500.</i> <i>Not intended to support staff salaries or wages.</i></p>
<p style="text-align: left;">Amount requested:</p>	

PART 3 – PROJECT INFORMATION
<p>1. Why are funds being requested? What will they be used for? Please outline the details of the Trail, maintenance program, repair project, trail enhancement activity or service.</p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>
<p>2. Please describe the benefits your Trail, maintenance program, repair project, trail enhancement activity or service will provide to the Municipality of the County of Victoria and its residents.</p> <div style="border: 1px solid black; height: 150px; margin-top: 5px;"></div>



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3. Please describe the community/area and group(s) your organization serves.

PART 4 – BUDGET	
PLANNED EXPENDITURES (list all costs related to your trail, maintenance program, repair project, trail enhancement activity or service)	Amount
Material	
Labour	
Equipment	
Other (Please specify)	
Other (Please specify)	
Other (Please specify)	
Other (Please specify)	
TOTAL PROJECT COST	
APPLICANT CONTRIBUTION (list all sources of revenue generated by applicant)	Amount
Fundraising	
Self-generated revenue	
Cash on hand	
Bank loans	
Donated material	
Donated labour	
Donated equipment	



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TOTAL APPLICANT CONTRIBUTION	
OTHER FUNDING (list all sources of other funding including all municipal sources)	Amount
Federal	
Provincial	
Municipal	
Other (Please specify)	
Other (Please specify)	
Other (Please specify)	
TOTAL OTHER FUNDING	

PART 5 – DECLARATION AND SIGNATURE		
<p>The information provided on this application form and accompanying documentation is accurate to the best of my knowledge. I give the Municipality of the County of Victoria authority to verify any and all information pertaining to this application. I also confirm that I have the authority to complete this application on behalf of the applicant organization.</p>		
Application prepared by:		
<i>Print Name</i>	<i>Signature</i>	<i>Date</i>

FOR OFFICE USE ONLY	
Date application received:	
Received by:	
Municipal funding received last year:	
<input type="checkbox"/>	Fulfilled all obligations from prior year?
<input type="checkbox"/>	Clear of all debt owing to Municipality?
Amount approved:	