Community Incentive Grant Program Application Form

Winnipeg

This application will be photocopied; please print in ink or type.

1. Legal name of the organization	Fort Garry Community Centre Inc.			
2. Permanent mailing address of the organization	Address 680 Oakenwald Av Box 23100 RPO McGillivray		City/Town Winnipeg	Postal Code R3T 5S3
	Organization e-mail		Phone	Fax 948-1554
3. Names of organization's representatives who will be overseeing the project	Primary Contact Harald Larsen		Title Past President	
	Business Phone 945-0187	Residence Phone 452-0049	Email HARALD.LARSEN@GOV.MB.CA	
	Secondary Contact Todd Buchanan		Title Executive member	
	Business Phone 632-2459	Residence Phone 453-1647	Email TKBUCHAN@YAHOO.CA	
4. Year the organization was formed Organizations created solely to apply for the program are not eligible.			Year 2010	
5. CIGP requested amount Up to 50% of the total project cost to a maximum of $225,000			$ 10,000.00	

6. List other sources of project funding including other grants, funds on hand and proposed fund-raising; indicate whether or not each source of funding is confirmed.

Note: no other City funds may be used towards the applicant's 50% share of the project cost.

Source	Amount	Confirmed
1. Jenny Gerbasi	$ 10,000.00	☒ Yes ☒ No
2. FGCC funds	$ 20,125.00	☒ Yes ☒ No
3.	$	☒ Yes ☒ No
4.	$	☒ Yes ☒ No
5.	$	☒ Yes ☒ No
6.	$	☒ Yes ☒ No

7. Total project cost Project costs should be supported by at least two contractor quotes or estimates. Enter the costs provided by the preferred contractor.	$ 40,125.00
8. Has this project received prior funding through the Community Incentive Grant Program?	☒ Yes ☒ No

9. Project name Assign your project an accurate, descriptive name to be used in all correspondence.

FGCC Conceptual Architectural Drawings

10. Project Site Address Provide a complete, accurate indication of exactly where the project is planned. A site plan is helpful. various	Property owned by: FGCC / City of Winnipeg
11. Anticipated Start & End Dates Start Date 20100901	End Date 20110630

12. Detailed Project Description: Attached on separate sheets or use the space on back of this form. Provide a detailed description of the project which addresses the selection criteria. Please include a description of the project objectives and how the project will accomplish those objectives; a detailed scope of work and, if possible, preliminary project plans or drawings.

APPLICANT SIGNATURES: I/We hereby certify that I/we am/are the authorized signing officer(s) of the applying organization and this application is accurate to the best of my/our knowledge.

Signature of authorized signing officer	Title/Position	Date
	Past President	20110610
Signature of authorized signing officer	Title/Position Sport Director	Date 2011/06/14