Community Incentive Grant Program Application Form

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

1. Legal name of the organization	PHOENIX SOCCER CLUB		
2. Permanent mailing address of the organization	Address: P.O. Box 28001	City/Town: WINNIPEG	Postal Code: R2G 4E9
	Organization e-mail: INFOPHOENIXSOCCER@SHAW.CA	Phone: 661-1528	Fax: 654-4419
3. Names of organization's representatives who will be overseeing the project	Primary Contact: BRUCE GRAHAM	Title: PRESIDENT	
	Business Phone: 799-5693 / Residence Phone: 668-4789	Email: b_graham@shaw.ca	
	Secondary Contact: DICK DERRETT	Title: ADMINISTRATOR	
	Business Phone: 661-1528 / Residence Phone: 254-3813	Email: INFOPHOENIXSOCCER@shaw.ca	
4. Year the organization was formed Organizations created solely to apply for the program are not eligible.		Year: 2003	
5. CIGP requested amount Up to 50% of the total project cost to a maximum of $225,000		$ 4984.00	

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.	PHOENIX SOCCER CLUB	$ 4984.00	☒ Yes ☐ No
2.		$	☐ 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.	$ 9968.00
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.

PURCHASE A RIDING LAWN MOWER

10. Project Site Address Provide a complete, accurate indication of exactly where the project is planned. A site plan is helpful.	ANDERSON PARK 900 RALEIGH ST.	Property owned by: CITY OF WINNIPEG
11. Anticipated Start & End Dates	Start Date	End Date

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
[signature]	PRESIDENT	08/02/2012
[signature]	VICE PRESIDENT	08/02/2012