M. 22/14

Winnipeg

Community Incentive Grant Program Application Form

This application will be photocopied, please print in ink or type

1. Legal name of the organization	Central Corydon Community Centre Inc.		
2. Permanent mailing address of the organization	Address: 1370 Grosvenor Ave	City/Town: Winnipeg.	Postal Code: R3M0P2
	Organization e-mail: abajon@corydoncc.com	Phone: 204-488-7000	Fax: 204-488-3224
3. Names of organization's representatives who will be overseeing the project	Primary Contact: Abdul Bajon	Title: Operations Manager	
	Business Phone: 204-488-7000 / Residence Phone:	Email: abajon@corydoncc.com	
	Secondary Contact: Dianna Bilinski	Title: Accountant	
	Business Phone: 204-488-7000 / Residence Phone:	Email: dbilinski@corydoncc.com.	
4. Year the organization was formed	2011	Year	
5. C.I.G.P. requested amount Up to 50% of the total project cost		$ 30,000	

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. Parks & Recreation Enhancement Capital	$ 150,000	☑ Yes ☐ No
2. WMBA foundation	$ 50,000	☑ Yes ☐ No
3. Central Corydon Community Cen.	$ 18,118.35	☑ 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.	$ 218,118.35
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.

Crescentwood basketball courts.

10. Project Site Address Provide a complete, accurate indication of exactly where the project is planned. A site plan is helpful. 1170 Corydon Ave	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
A Bajon	Operations Manager	May 21/14
Signature of authorized signing officer	Title/Position	Date
	Sport/program Manager	May 21/14.