

Adobe Reader 8.0+ is required to complete this application form.

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1. Project Name

Provide a name for the project that is proposed in this funding application:

2. Applicant Profile

| | |
|--------------------------------------|--|
| Applicant Organization (Legal Name): | Non-Profit Society Registration No. (if applicable): |
| Address (street, city, postal code): | |
| Telephone: | Fax: |
| Email: | Website (URL): |

3. Primary Contact Information

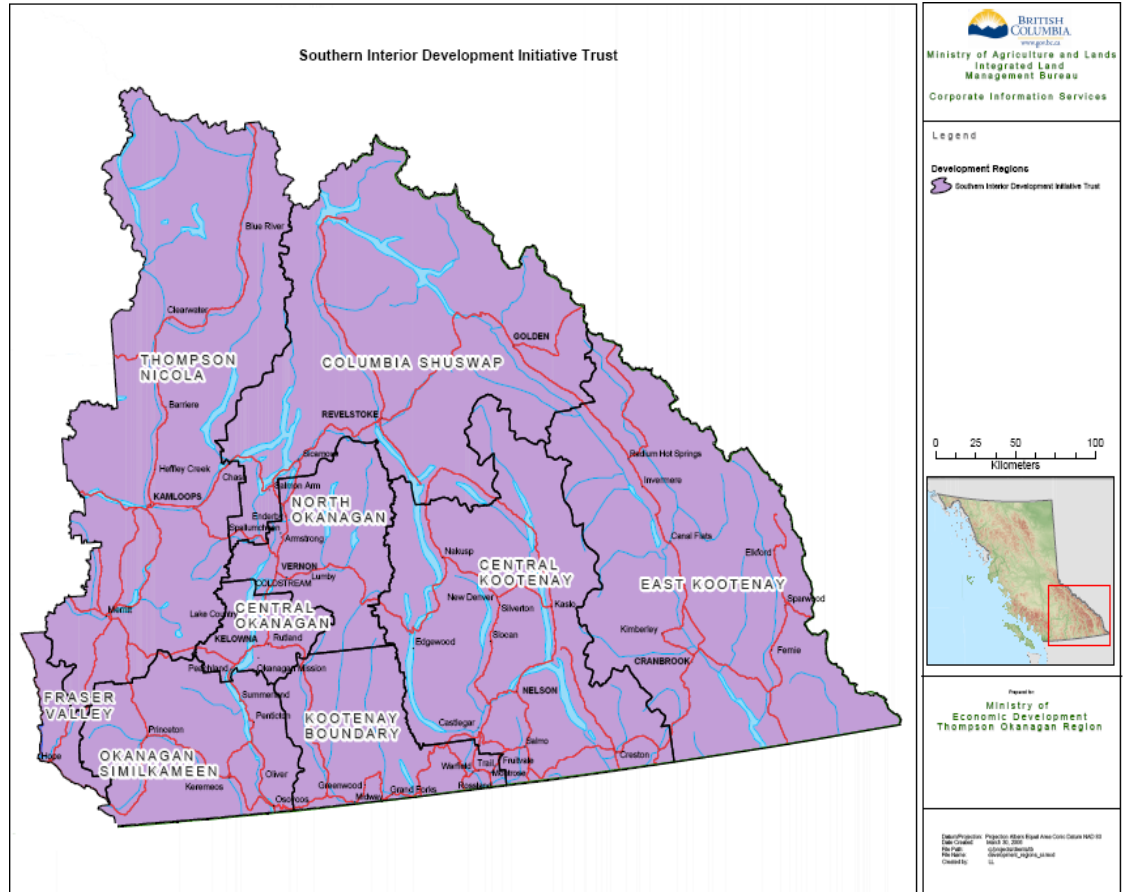
| | |
|---|-------------------|
| Primary Contact (for this application): | Position / Title: |
|---|-------------------|

Complete the following if different from Applicant Organization contact information:

| | |
|--------------------------------------|------------|
| Address (street, city, postal code): | Telephone: |
| Email: | Fax: |

4. Trust Region

Southern Interior Development Initiative Trust Region:



Identify the municipality or regional district where this project will be located:

What is the population of the area benefiting from the project?

5. Project Overview

| Identify the project's primary investment area: | Identify the project's secondary investment area: |
|--|--|
| Agriculture | Agriculture |
| Economic Development | Economic Development |
| Energy | Energy |
| Forestry | Forestry |
| Mining | Mining |
| Olympic Opportunities | Olympic Opportunities |
| Pine Beetle Recovery | Pine Beetle Recovery |
| Small Business | Small Business |
| Tourism | Tourism |
| Transportation | Transportation |

SIDIT project investments must fall within the ten investment areas above as identified in the Southern Interior Development Initiative Trust Act.

| |
|---|
| Provide a description of the project: |
| <p>✦ <i>Outline the key project elements as they relate to SIDIT funding objective(s)</i></p> |
| Explain the rationale for the project: |
| <p>✦ <i>Explain how your proposal is consistent with SIDIT's Strategic Plan.</i></p> |

6. Direct Economic Benefits

Outline the direct economic benefits to the local or regional economy:

7. Current Employment

| Nature of positions: | Number of existing positions: | Hours of employment per week (average): | Total person months employed annually (average): | How does the proposed funding help to sustain the existing positions? |
|----------------------------------|-------------------------------|---|--|---|
| Direct permanent full-time jobs: | | 35+ hours/week | 12 months/year | |
| Direct permanent part-time jobs: | | hours/week | 12 months/year | |
| Direct seasonal jobs: | | hours/week | months/year | |

8. New Employment (Job Creation)

The following job creation will be reported on by the applicant organization for a five (5) year period to demonstrate the direct economic benefits of the project:

| Nature of positions: | Number of new positions to be created: | Hours of employment per week (average): | Total person months of employment to be created (average): | New Full Time Equivalent (FTE) |
|--|--|---|--|--------------------------------|
| Direct permanent full-time jobs: | | 35+ hours/week | 12 months/year | |
| Direct permanent part-time jobs: | | hours/week | 12 months/year | |
| Direct seasonal jobs: | | hours/week | months/year | |
| Direct temporary jobs (construction or consulting): | | hours/week | months/year | |
| TOTAL PROPOSED FULL-TIME EQUIVALENT (FTE) JOB CREATION: | | | | |
| <p>★ Full-time equivalent (FTE) job creation is aggregated from information provided above. 1.0 FTE is equal to 1 new position working 35 hours/week for 12 months/year.</p> | | | | |

9. Increased Revenue Generation

The following annual revenue generation will be reported on by the applicant organization for a five (5) year period to demonstrate the direct economic benefits of the project:

| Current Annual Revenues: | Projected Annual Revenues | | | | |
|--|---------------------------|--------|--------|--------|--------|
| | Year 1 | Year 2 | Year 3 | Year 4 | Year 5 |
| \$ | \$ | \$ | \$ | \$ | \$ |
| Describe how the revenue will be generated and the sources of revenue: | | | | | |
| | | | | | |
| What percent of the projected annual revenue is from outside Southern Interior BC? | | | | | % |

10. Project Participation

| List all participants that will actively contribute to the project: | |
|---|--|
| Communities / Local Government : | |
| First Nations Communities: | |
| Private Businesses: | |
| Non-Profit Organizations: | |
| Governmental Organizations: | |

11. Project Budget

| Expense Item: | Amount (\$): | Verification: |
|---------------------------------|--------------|-------------------|
| | \$ | Quote(s) attached |
| | \$ | Quote(s) attached |
| | \$ | Quote(s) attached |
| | \$ | Quote(s) attached |
| | \$ | Quote(s) attached |
| | \$ | Quote(s) attached |
| TOTAL PROJECT BUDGET: \$ | | |

Complete the above, however if you wish to provide a more detailed project budget, please attach separately to this Application.

12. Project Milestones

| Milestone: | Scheduled Completion Date: | Describe the current stage of the project: |
|------------|----------------------------|--|
| 1) | | |
| 2) | | |
| 3) | | |
| 4) | | |
| 5) | | |
| 6) | | |

Complete the above, however if you wish to provide a more detailed milestone schedule, please attach separately to this Application.

13. Funding Request

The following funding is requested from Southern Interior Development Initiative Trust:

| Funding Type: | Amount (\$): | |
|----------------------------|--------------|-----------------------------|
| Grant (max \$50,000) | \$ | |
| Loan | \$ | Re-Payment Terms Requested: |
| TOTAL REQUESTED: \$ | | |

14. Other Funding Sources

| Funding Source: | Amount (\$): | Identify funding terms: | | Identify funding confirmation: |
|--------------------------------|--------------|--|------|--------------------------------|
| | \$ | Grant | Loan | Approval letter attached |
| | | Other: | | Date approval expected: |
| | \$ | Grant | Loan | Approval letter attached |
| | | Other: | | Date approval expected: |
| | \$ | Grant | Loan | Approval letter attached |
| | | Other: | | Date approval is expected: |
| | \$ | Grant | Loan | Approval letter attached |
| | | Other: | | Date approval expected: |
| | \$ | Grant | Loan | Approval letter attached |
| | | Other: | | Date approval expected: |
| | \$ | Grant | Loan | Approval letter attached |
| | | Other: | | Date approval expected: |
| TOTAL OTHER FUNDING: \$ | | TOTAL PROJECT FUNDING: \$ (SIDIT + Other Sources) | | |

Prior to disbursement of funds, SIDIT must receive copies of letters of approval for all other funding sources. Please attach all letters of approval received to date with this Application. If there are more than six other funding sources, attach a complete list separately.

15. Leveraging

Calculate SIDIT's funding leverage for the project:

The funding request as a percentage of total project funding is: _____ %

✦ *Leverage % = (SIDIT funding request) ÷ (Total project funding)*

SIDIT provides a maximum of \$50,000 grant funding up to 50% of a total project budget (a minimum leveraging ratio of \$1.00 from SIDIT to \$1.00 from other sources).

16. Sustainability

Explain how the project will be financially sustainable for five (5) years:

Describe how the project will contribute to the diversification of the economy (new products, services or activity):

Describe how the project will contribute to environmental sustainability:

Describe Management Capability and Organizational Structure:

17. Other

Market Assessment and Competitive Impact: *(describe the market the project is seeking to serve. Identify competition and impacts on adjacent communities or region.)*

Other Benefits:

18. Attachments

List all documents attached to this application:

Document Name:

1)

2)

3)

4)

5)

6)

7)

8)

19. Authorization

I AFFIRM THAT the information in this application is accurate and complete, and that the project proposal, including plans and budgets, is fairly presented. I agree that once funding is approved, any change to the project proposal will require prior approval of Southern Interior Development Initiative Trust (SIDIT).

I also agree to submit report reporting materials as required by SIDIT, and where required, financial accounting for evaluation of the activity funded by SIDIT. I understand that the information provided in this application may be accessible under the Freedom of Information (FOI) Act.

I agree to publicly acknowledge funding and assistance by SIDIT.

I authorize SIDIT to make any enquiries of such persons, firms, corporations, federal and provincial government agencies/departments and non-profit organizations operating in my organization’s field of activities, to collect and share information with them, as SIDIT deems necessary, in order to reach a decision on this application, to administer and monitor the implementation of the project and to evaluate their results after project completion.

I agree that information provided in this application form may be shared with the appropriate Regional Advisory Committee(s), Board Members, and/or SIDIT staff and consultants.

Organization Name:

Name:
Organization Signing Authority

Title:

Date:

20. Submitting Your Application

Completed Funding Application forms (with all required attachments) should be provided electronically to Southern Interior Development Trust by email.

Email admin@sidit-bc.ca

Fax the signed authorization page to (250) 545-6896