

**HRM Community Facilities Partnership Fund
2009-2010
Application Cover Sheet**

1. Name of Applicant Organization(s):	2. Contact Person: Telephone: Fax:
3. Mailing Address:	4. Civic Address of Capital Project
5. Proof of Non-Profit Status: NS Registry of Joint Stocks Number: Federal Charity Status Number: Act of the Nova Scotia Legislature (name the Act or enclose copy): Non-Profit Cooperative: Other (specify):	
At a minimum applicants must provide the following: Comprehensive description of the capital project. Organization's financial statement. Comprehensive business plan including project capital budget, project cash flow plan, projected operating budget, identified and confirmed funding (minimum 50% and proof of financing for the balance). Confirmation of as of right development or development agreement, permitted use (zoning), Agreement of Purchase and Sale, or copy of signed lease (minimum term of 20 years) as applicable. Value of request and applicable expenditure(s). Market demand and/or feasibility study as applicable. Environmental assessment as applicable. Event bid/acceptance, high performance centre designation, Description of project management team and applicable qualifications and related experience (eg. contractor, project management, consultants).	
Note: Information provided in this application may be shared with other parties, including but not limited to other government funding programs and third party reviewers. Private and confidential information should be noted. Applications from applicants in debt or a party to a legal dispute may be declined consideration. Late applications will not be accepted. Please do not fax or email your submission.	