

APPLICATION FOR FUNDING

Municipal Capital Works Program 2014

| APPLICANT INFORMATION | | | | | |
|-----------------------------------------------------------------------------------------------------------------------|--------------------|-----------|------------------|------------------|--|
| Municipality: | | | | | |
| Address: | | | | | |
| Town/City: | | Province: | | Postal Code: | |
| Contact Name: | | Position: | | | |
| Address (if different from abov | <i>e</i>): | | | | |
| Phone: | Fax: | | Email: | | |
| PROJECT INFORMATION | | | | | |
| Project Title: | | | | | |
| Has Council passed a resolution approving this project? Yes \square No \square Priority No.: | | | | | |
| Problem Description: | | | | | |
| Project Description/Abstract: | | | | | |
| Is the proposed project an upgrade or repair to an existing physical infrastructure? Yes \Box No \Box | | | | | |
| Does this project include Public/Private Partnerships? Yes \Box No \Box If yes, please provide name of partner(s) | | | | | |
| Is this a regionalization project? Yes $\hfill\Box$ No $\hfill\Box$ If yes, provide a list of communities involved: | | | | | |
| PROJECT SCREENING CRITERIA | | | | | |
| Does this project conform to the town's Municipal Plan? | | | Yes □ No □ | | |
| Does the town have any NMFC arrears? | | | Yes □ No □ | | |
| Is the project financially feasible for the town | | | | Yes □ No □ | |
| Water Infrastructure - Transmission/Distribution and/or Treatment Systems | | | | | |
| Does project conform to Limit of | of Servicing Plan? | | | Yes □ No □ N/A □ | |
| Does the town have a Permit to Operate for water distribution? | | | Yes □ No □ N/A □ | | |
| Does the town currently have water quality issues? | | | Yes □ No □ N/A □ | | |
| Does the town have a Permit to Operate for water treatment | | | Yes □ No □ N/A □ | | |
| Does your water system conform to the Canadian Drinking Water Guidelines? | | | | Yes □ No □ N/A □ | |

| Is community currently on a Boil Order? | | | Yes □ No □ N/A □ | | | |
|---------------------------------------------------------------------------------------------------------------------------------|---------------------------|-------------------------|------------------------|--|--|--|
| Is community providing water treatment? | | | Yes □ No □ N/A □ | | | |
| Number of Services: | | Cost per Service: \$ | ' | | | |
| Wastewater and Sanitary Sewage Collection and/or Treatment Systems | | | | | | |
| Does project conform to Limit of Servicing Plan? | | | Yes □ No □ N/A □ | | | |
| Does the town have a Permit to Operate for water distribution? | | | Yes □ No □ N/A □ | | | |
| Local Roads and/or Bridges | | | | | | |
| Does project conform to Limit of Servicing Plan? | | | Yes □ No □ N/A □ | | | |
| Is there a 10 Year Moratorium Agreement (for roads projects)? | | | Yes □ No □ N/A □ | | | |
| Recreational - S | ports Facilities, Fields/ | Parks, Playgrounds, Bik | e Paths/Fitness Trails | | | |
| Need for organized play area for indoors for all ages in passive or active activities? | | | Yes □ No □ N/A □ | | | |
| Need for outdoor organized play areas hard and soft surface? | | | Yes □ No □ N/A □ | | | |
| Will you be charging admission to this facility? | | | Yes □ No □ N/A □ | | | |
| Fire Fighting Equipment | | | | | | |
| Has the town adopted an Emergency Management Plan? | | | Yes □ No □ N/A □ | | | |
| PROJECT COST ESTIMATE (INCLUDING HST) | | | | | | |
| Construction: | \$ | | | | | |
| Prime Consultant: | \$ | | | | | |
| Equipment: | \$ | | | | | |
| Town Forces: | \$ | | | | | |
| Other | \$ | Details: | | | | |
| Total Project: | \$ | | | | | |
| Other Funding | \$ | Source: | | | | |
| Total Required: \$ | | | | | | |
| Detailed Estimate Attached: Yes □ No □ | | | | | | |
| Estimate Prepared by: Date | | | Date: | | | |
| Do you propose to use Gas Tax funding for this project Yes $\hfill\Box$ No $\hfill\Box$ If yes, amount? Gas Tax Project Number: | | | | | | |
| Are you applying Gas Tax funding towards your portion of the contribution? Yes \square No \square | | | | | | |
| Permission obtained from Gas Tax Secretariat: Yes \square No \square | | | | | | |
| ESTIMATED CASH FLOW | | | | | | |
| Project Total: | | \$ | | | | |
| Total Estimated Budget 2014 | | \$ | | | | |
| Total Estimated Budget 2015 | | \$ | | | | |
| Total Estimated Budget 2016 | | \$ | | | | |

| PROJECT BENEFITS | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------|--|--|--|--|
| Please indicate project related benefits: | | | | | |
| Infrastructure | | | | | |
| Protection of the integrity, useful life or serviceability of existing municipal infrastructure Rehabilitation, restoration or replacement of existing municipal infrastructure Upgrade existing municipal infrastructure to current capacity requirements or design standards Improvement in the reliability, performance or efficiency of municipal infrastructure Provision of infrastructure essential to support core municipal functionality (town halls, garages, fire halls, etc.) Assessment and planning of long-term infrastructure requirements, conditions and management practices | | | | | |
| Service Availability | | | | | |
| Provision of services or facilities not otherwise readily available to the Increase in number of users provided with connection to municipal pu Increase in number of users provided with connection to municipal satisfied and disposal system Increase in number of users provided with connection to municipal storand disposal system Increase in the number of properties provided with fire protection from Reduction in travel distance to avail of recreational, cultural and social Paving of gravel roads | blic water supply nitary sewage collection orm sewage collection m local hydrants | | | | |
| Service Quality | | | | | |
| Improvement in the quality or level of services provided Disinfection of untreated public water supply Improvement in the quality of water available from public water supply Reduction in the volume of untreated sanitary sewage discharged to the environment Improvement in the ride quality of paved roads Improvement in management of storm water drainage | | | | | |
| Service Efficiency | | | | | |
| Reduction in the cost of service to the municipality or the users Improvement in the functionality or reliability of services Reduction in service demand (leakage, water consumption, sewage discharge, etc.) | | | | | |
| Environmental | | | | | |
| ☐ Mitigation of negative environmental impacts | | | | | |
| Reduction of greenhouse gas emissions Increased use of clean-energy technologies | | | | | |
| Reduction in the level of risk associated with contaminated sites | | | | | |
| Other | | | | | |
| Reduction in risks to human health Reduction in risks to the safety of workers, users or the general public Reduction in risk of damages to public or private property Compliance with legislative or regulatory requirements Increased sustainability of municipal development and support of efficient land use Other benefits as listed in the Project Description/Abstract, or in an uploaded document | | | | | |
| LIST OF DOCUMENTS ATTACHED | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Application prepared by: | | | | | |
| Signature: | Date | | | | |

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