



Special Assistance Grant (SAG) Application

Name of Community: _____

Contact Person for Application: _____

Phone #: _____ Email: _____

Please describe nature of the request:

Infrastructure related requests continue to Section A, non-infrastructure related requests continue to Section B.

Section A: Infrastructure Information

Does Municipality own the infrastructure? Yes No

Is the Infrastructure within Municipality's Planning Boundary? Yes No

Initial Infrastructure Damage Date: _____

Location/Area of damage (Attach map or location plan): _____

What year or approximate year was the infrastructure built? _____

Have the repairs been completed? Yes No

Is the infrastructure located in a designated flood risk area? Yes No

Does municipality have pictures showing condition before and after damage occurred? (If yes, please attach to application.) Yes No

Does infrastructure damage present a risk to Public Safety? Yes No
If yes, explain this risk:

Will damaged infrastructure affect other municipal infrastructure? Yes No
If yes, explain the impact:

Please describe any preventative and/or demand maintenance activities completed on this system over the last three years:

Describe the type of infrastructure and the extent of damages:

Describe the repair(s) required to restore infrastructure to normal condition and if any repairs have been initiated:

Was infrastructure insured? Yes No

 If yes, has a claimed been filed: Yes No

What portion of the population does the infrastructure impact?

 0-20% 21-40% 41-60% >60%

Has this infrastructure been submitted as a part of any other Program (including previous SAG request, Municipal Capital Works, Federal Gas Tax)? Yes No

If yes, when: _____

Section B: Financial Information

Cost Estimate: \$ _____ Funding requested: \$ _____

Please use the following table to determine the applicable cost shared ratio, using your population and nature of request.

Project Category	Population	Municipal Share	Provincial Share
Water, waste water, disaster mitigation	Less than 3,000	10%	90%
	3,000 and 7,000	20%	80%
	Greater than 7,000	30%	70%
Fire fighting vehicles and equipment	Less than 3,000	20%	80%
	3,000 and 7,000	30%	70%
	Greater than 7,000	40%	60%
Recreational projects, buildings, fire halls	All population bands	40%	60%
Roads and other funding requests	All population bands	50%	50%

Cost Shared ratio: _____ Municipal Share: \$ _____

Please confirm your ability to afford your share of the applicable cost share ratio Yes No

Signature: _____

Title: _____

Date: _____

Please be advised that if further clarification and other supporting documentation is required, you will be contacted accordingly.

Submit completed application and supporting documentation to:

Department of Municipal and
Provincial Affairs
Municipal Finance Division
4th Floor, West Block
P.O. Box 8700
St. John's, NL A1B 4J6

Facsimile: (709) 729-3605
E-mail: SpecialAssistanceGrants@gov.nl.ca

Questions? Please call 1-877-729-4393 or E-mail: SpecialAssistanceGrants@gov.nl.ca

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