

# Township of Cramahe Community Grant Application



Organization:			
Amount Requested			
Contact:			
Position:			
Telephone: (Office)	Telephone: (Other)		
Email:			
Address:			
City:			
Province:	Postal Code:		
Contact Address: (If different than above)			
Have you received a grant from this program in the past? _____ If YES, when:	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO		
Are you incorporated? _____ If YES, Registration#::	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO		
Are you a registered charity? _____ If YES, Registration#::	<table border="1"> <tr> <td>YES</td> <td>NO</td> </tr> </table>	YES	NO
YES	NO		

Project Outline:

Please provide an overview of the proposed project.

Objectives:

Please provide a brief description of the projects' objectives to be achieved and how this project meets the objectives outlined in this policy.

Economic Benefits:

Describe the benefits of the project to the local economy.

What is the projected number of Cramahe residents that this funding would benefit?

<u>Partnerships:</u> Is the project being done in conjunction with other group(s)? <hr/> If YES, please list the other groups.	<div style="border: 1px solid black; padding: 5px; text-align: center;">YES</div>	<div style="border: 1px solid black; padding: 5px; text-align: center;">NO</div>
Outline the number of volunteers involved with the event / project:    		
<u>Alternate Funding:</u> Is the project being funded from another source? <hr/> If YES, please indicate the group and amount.	<div style="border: 1px solid black; padding: 5px; text-align: center;">YES</div>	<div style="border: 1px solid black; padding: 5px; text-align: center;">NO</div>
What will be the outcomes / results of this funding?    		

The following documentation **MUST** be attached to this application:

- ❖ Most Recent Financial Statements

Applicant Signature: \_\_\_\_\_

**Completed Applications are to be submitted by October 31st 2025**

to:

**Finance Department**

**Township of Cramahe**

**C/O Tanya Ogden**

**P.O. Box 357 1 Toronto St. Colborne, ON K0K 1S0**