



Housing Catalyst Fund Grant Application

Individual / Organization Information

SECTION 1

Name of Individual/Organization _____

Contact Person _____

Address _____

Telephone (work) _____ (cell) _____

Email _____ Website _____

Incorporation Number _____

Grant Request

SECTION 2

Amount requesting from the City \$ _____

Percentage of total revenue _____ %

Have you previously received funding under the City of St. John's Housing Catalyst Fund Grant Program?

Yes No If yes, most recent year _____

Project Title _____

Anticipated start and end dates of the Project: Start _____ End _____

Project Information

SECTION 3

Provide a brief description of the intended use of the funds requested, i.e. activity, program, event:

Please describe, in some detail, how the project/activity/housing development will leverage this fund and lead to housing solutions that will address needs in our community:

How does it align with the City of St. John's Affordable Housing Strategy 2019 – 2028?

Will it have significant impact on creating, maintaining, and/or supporting local housing options?

How will this grant help with the project?

What is the long-term goal or end result?

What do you anticipate the short and mid-term outcomes of this project will be for the community?

We require a detailed balanced budget for your project.

Has your group/organization formally requested funding from any other source for this project?

Yes No

If yes, please provide detail and advise if funding has been confirmed:

Amount requesting from the City \$_____ Percentage of total revenue _____%

Summary of Estimated Project Costs

Description	Cost

Proposed Financing of Project (Anticipated or confirmed revenue from all sources, including, but not limited to other government sources, donations, sponsorships, sales, etc.).
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Description	Cost

Applicant Declaration (two signatures required for group/organizations)	SECTION 5
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It is the responsibility of the applicant to ensure all required information is submitted. Incomplete applications will be considered ineligible.

I AFFIRM THAT the information in this application is accurate and complete and the financial information is fairly presented. I agree that once funding is provided, any change to the organization program delivery will require prior approval from the City of St. John's. I agree to publicly acknowledge funding and assistance by the City of St. John's. I understand that the information provided in this application may be accessible under the Access to Information and Protection of Privacy Act. I also agree to respect the spirit and intent of the various acts governing the programs of the City of St. John's.

Signatures and contact information of two principal officers of the group or organization:

Name _____ Title _____

Email _____ Tel _____

Signature _____ Date _____

Name _____ Title _____

Email _____ Tel _____

Signature _____ Date _____

Important Information: The deadline for applications is the last Friday of November.



Collection of personal information via this form is authorized under the Access to Information and Protection of Privacy Act, 2015 and is needed for the purpose of grant approval. Questions about the collection and use of the information may be directed to the Affordable Housing Facilitator, Community Services, affordablehousing@stjohns.ca

Please send completed form to:

City of St. John's
Housing Division
St. John's, NL A1C 5M2
Email: affordablehousing@stjohns.ca
Fax: 709-576-8078

For further information:
Affordable Housing Facilitator
Phone: 709-570-2096

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NEWFOUNDLAND AND LABRADOR, CANADA