

Kawartha Water Fund  
Community Grant  
Application



Kawartha Conservation  
277 Kenrei Rd  
Lindsay, ON K9V 4R1  
705.328.2271  
1.800.668.5722

Application number: \_\_\_\_\_

A) Applicant information

Group name: \_\_\_\_\_

Type of organization:

- Registered charity
- Local service board
- Not-for-profit corporation
- Other (describe) \_\_\_\_\_

If applying as a registered charity, or not-for-profit, please provide the following information:

Year of incorporation or charitable registration: \_\_\_\_\_

Incorporation or charitable registration number: \_\_\_\_\_

Telephone number: \_\_\_\_\_ Fax: \_\_\_\_\_

Email address: \_\_\_\_\_

Mailing address: \_\_\_\_\_

Town: \_\_\_\_\_ Postal code: \_\_\_\_\_

Contact person name: \_\_\_\_\_

Project address (if applicable): \_\_\_\_\_

Lot: \_\_\_\_\_ Concession: \_\_\_\_\_ Municipality: \_\_\_\_\_

How many staff members are employed by your organization? \_\_\_\_\_

How many active volunteers are involved with your organization? \_\_\_\_\_

B) Project summary

Funding request:

Total amount of funding requested (grant amount): \_\_\_\_\_

Total cost of project: \_\_\_\_\_

Type of project (please select one):

- Brochure printing/distribution
- Educational event/workshop
- Restoration project
- Demonstration site
- Community planting event
- Urban stormwater management
- Other project (describe)
- Aquatic plant management
- Invasive species management
- Lake health monitoring
- Reforestation
- Urban stormwater best management practices

In 50 words or less, describe what you plan to do with the grant money:

Which lake plan recommendation(s) will be addressed with the proposed project? Check all that apply:

- |  |  |
|--|--|
| <input type="checkbox"/> Shoreline naturalization                            | <input type="checkbox"/> Agricultural best management practices projects |
| <input type="checkbox"/> Urban stormwater best management practices projects | <input type="checkbox"/> Pilot projects                                  |
| <input type="checkbox"/> Invasive species management                         | <input type="checkbox"/> Profiling lake values                           |
| <input type="checkbox"/> Coordinated monitoring of lake health               | <input type="checkbox"/> Research on emerging pressures                  |
| <input type="checkbox"/> Septic system management                            | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Keeping stakeholders informed                       | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Implementing other community plans                  | <input type="checkbox"/> _____   |
| <input type="checkbox"/> Management of public waterfronts                    |  |
| <input type="checkbox"/> Aquatic plant management options                    |  |

Explain why your proposal is important. Clearly state how it fills a gap or meets a need:

How many volunteers and volunteer hours will be contributed to this proposal? Describe how you will track volunteer contributions and your plan to recruit, train and recognize these volunteers:

C) Attachments and conditions

Attachments:

Please ensure that all required attachments are submitted with your application. Applications will not be reviewed unless all required attachments are received.

Required attachments:

- Completed application
- Proposal budget form
- Proposal work plan

**Please send all attachments to:**

Kawartha Conservation  
c/o Stewardship Coordinator  
277 Kenrei Road  
Lindsay, ON K9V 4R1  
[HShipclark@KawarthaConservation.com](mailto:HShipclark@KawarthaConservation.com)

Conditions:

- If the proposed project requires access and/or alteration to land, permission from the landowner must be obtained prior to proposal submission. Proof of permission must be provided to Kawartha Conservation.
- Priority will be given to Community Groups who have not previously received funding under this program.
- Projects must show potential to maintain or improve water quality, water quantity, or aquatic and terrestrial habitats of the Kawartha Lakes watersheds.
- Project proposals will be presented to the Review Committee for recommendation. Funding allocation approved by Kawartha Conservation.
- Before and after pictures must be provided to Kawartha Conservation for projects which include site alterations.
- All relevant permits must be obtained prior to project commencement.
- All project costs will be incurred by the applicant. Upon project completion, the applicant must provide proof of expenditures to Kawartha Conservation to receive approved grant dollars.

Signatures of Authorized Representatives for the organization:

We certify that to the best of our knowledge that the information provided in this grant request is accurate and complete and that it is endorsed by the Organization which we represent. If our Organization receives a Community Stewardship Grant, we agree to the conditions set out above and to any other conditions approved by the Project Review Committee.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Your agreement through this form will remain in effect until such time as you terminate the agreement by notifying Kawartha Conservation in writing.

Pursuant to the Municipal Freedom of Information and Protection of Privacy Act, the personal information contained on this form is collected under the authority of the Conservation Authorities Act R.S.O 1990, c. 27 s. 21. (1). This information will be used for the purpose(s) you have indicated.

Questions about the collection of information should be directed to Wanda Stephen, Director, Corporate Services, Kawartha Region Conservation Authority, 277 Kenrei Road, Lindsay, ON., K9V 4R1, telephone 705.328.2271, ext. 226.

D) Project budget form			
CKL Water Fund community grant			
Prepared by:		Date:	
<b>Description of steps/processes</b> Include materials, services, and applicant in-kind contributions (labour, supplies, and equipment)	<b># of Units</b>	<b>Cost per unit</b>	<b>Total cost</b>
<b>Material and labour (contract) costs</b>			
<b>In-kind costs (\$15/hour for volunteer contributions)</b>			
<ul style="list-style-type: none"> <li>Please provide written estimates from contractors, service provider/suppliers.</li> <li>This sheet is used to determine funding amount. Please include all costs applicable for the project, in as much detail as possible</li> <li>For in-kind costs please use the provided rate and provide a detailed breakdown of each activity type and number of hours</li> </ul>	<b>Total project costs:</b>		
	If approved, make cheque payable to: _____ _____		

Office Use Only
Community group name: _____ Project Area or Address: _____ Town: _____ Postal Code: _____ Lot: _____ Concession: _____ Municipality: _____  Grant type: _____ Grant cap: \$ _____ Total project costs \$ _____ Eligible project costs \$ _____ Recommended funding for % _____ of eligible project costs. Funding not to exceed \$ _____  Funding based on: _____ Recommended for funding by Project Review Committee (date): _____ Signature of committee chair _____  Project completion date: _____ Final report completed: _____ Original receipt(s) collected: _____ Staff signature: _____

E) Proposal work plan

Objective	Activities planned to meet objectives	Team member responsible	Completed by: (month & year)