



**Cobourg Police Service
COMMUNITY SAFETY INNOVATION FUND (CSIF)
APPLICATION FORM**

Please read the CSIF [Guidelines](#) before completing the application form.

Incomplete applications will not be considered.

LEAD APPLICANT - ORGANIZATION INFORMATION			
Full Legal Name/Corporate Name of Applicant:			
Operating Name (if different from above):			
Organization Type:	Non-Profit	Charity	Social Enterprise
	Other (Specify):		
CRA Business Number:		Year Established:	
Address:			
Municipality/Town:		Postal Code:	
Website URL:			
Number of Employees:	Full-time	Part-time	
Number of Volunteers:	Full-time	Part-time	
Primary Project Contact			
Name:		Position/Title:	
Telephone Number:		Mobile Number:	
Email:			
Mailing Address is the same as above, or:			
Address:			
Municipality/Town:		Postal Code:	
Organization Description – include key services provided to the Town of Cobourg citizenry and businesses. (250 word maximum)			



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Project Management Experience – *describe the lead applicant's project management experience, and the resources and skills the applicant(s) will use to complete the project. (1500 word maximum)*

Empty text area for project management experience.



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CO-APPLICANT ORGANIZATION - Please consult the CSIF guidelines to ensure the co-applicant is eligible to apply.	
Are there co-applicant partner organizations for the project? NO YES # of Co-applicant(s)	
If yes, complete the Co-applicant Form A for each co-applicant and submit with your application.	
PROJECT DESCRIPTION	
Project Name:	
Project Start Date:	Project End Date:
Project Summary – Provide a short project description (2-3 sentences), summarizing the project. (200 word maximum)	
Project Rationale and Potential Impact – describe why the project is needed, the issue, challenge or opportunity being addressed, how innovation will play a role. How will the project impact community safety in the immediate to near-term and will it be sustainable beyond the project end date. (1500 word maximum)	



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Project Plan – describe the project activities and proposed outcomes with timelines. Activities should align with the activities listed in the Project Budget **Form B**. (2500 word maximum)



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PROJECT BUDGET- CSIF Project Budget **Form B** must be completed and submitted with the application.

PROJECT COSTS	
Cost Category	Amount
Minor Capital	
Non-Capital	
Third Party Expertise	
TOTAL PROJECT COSTS:	

FUNDING SOURCES		
Funding Source	Amount of Funding	Status of Confirmation
Applicant		
Co-applicant		
Other (specify)		
CSIF Request (Maximum \$50,000)		
TOTAL AMOUNT OF FUNDING		

MANDATORY SUPPORT INFORMATION

Please confirm the following mandatory information is attached/submitted with this application:

- Proof of legal name (Business/Non-Profit registration, or if incorporated, a copy of Articles of Incorporation)
- Financial Statements (at minimum, a YTD Profit & Loss Statement and Consolidated Balance Sheet)
- CSIF Project Budget **Form B**
- CSIF Co-Applicant **Form A** (completed for each Co-Applicant)

ADDITIONAL INFORMATION

Additional Information may be submitted to support your application. *(e.g. Business Model Canvas, Third party quotations for eligible project costs, letters of support etc.)*

AUTHORIZATION AND CERTIFICATION

As the lead contact and as an authorized signing officer of the Applicant, I certify to the Cobourg Police Service (hereinafter referred to as the *CPS*) that:

- (a) The principals of the Applicant have been notified and consented to the funder collecting, using, retaining and disclosing the information contained in this application for the limited purpose of determining eligibility for funding as is required by law and by the CPS. I understand that the CPS will handle personal information in strict confidence in accordance with Federal privacy law.
- (b) The information contained in this application is true and complete in all respects. If the CPS discovers that this application contains a material misrepresentation, this application shall be deemed to be withdrawn immediately by the Applicant.



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- (c) The Applicant agrees to provide any additional information that the CPS may reasonably require for purposes of assessing this application.
- (d) The Applicant certifies that financial assistance from the CPS is a significant factor in the decision to proceed with this project.
- (e) The applicant warrants that they are in good standing with Revenue Canada, Municipalities and other Government Ministries/Agencies.
- (f) The Applicant acknowledges that any approved Project will be the subject of public announcements.

I have read and understand this application and guidelines and will submit the required information with this proposal. **I understand incomplete applications cannot be assessed and will be deemed ineligible.**

Submitted by:

Title:

I have legal authority to bind the applicant

Date:

Signature:

Please save the completed form and submit with required support information to:

csif@cobourgpolic.com

Office Use ONLY

Complete Application Received on:	Received by:
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