

**Adobe Reader 8.0+ is required to complete this application form.**

If you are using an earlier version, you will not be able to save any information you enter into the form.

Adobe Reader is a free download available at: <http://www.adobe.com/products/acrobat/readstep2.html>

✦ **Please ensure documents are downloaded and saved to your computer desktop prior to entering any information. If opened and completed within your internet browser, any information entered will not be saved.**

**1. Project Name**

Provide a name for the project that is proposed in this funding application:

**2. Applicant Profile**

Applicant organization (legal name):

Applicant incorporation number and date:

Is this a First Nations or Aboriginal business?

Yes

No

Mailing address:

Telephone:

Email:

Website (URL):

**3. Primary Contact Information**

Primary contact (for this application):

Position/title:

Complete the following if different from applicant organization contact information:

Mailing address:

Email:

Telephone:

**4. Industry Sector and Primary Product/Service**

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Industry sector:			
Agriculture	Energy	Mining	Oil and gas
Aquaculture	Forestry	Manufacturing	
Primary product/service:			

**5. Company Information**

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Please provide some general information about your organization (eg. main products/services, clientele, past projects, etc.):

**6. Project Overview**

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Provide a concise description of the project:

Explain the rationale and project deliverables for the project:

**7. Rationale for Accessing the Pine Beetle Recovery Account**

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Describe the impact that the Mountain Pine Beetle epidemic has had on your organization and/or local economy (if applicable):

Describe how this project will positively impact your organization (including revenues or cost savings) and create opportunities for jobs in the community:

Explain how outcomes from this project can be applied regionally to mitigate the impacts of the Mountain Pine Beetle or diversify the economy:

**8. Current and New Employment (Job Creation)**

✦ *The following job creation will be reported on by the applicant organization for a three year period to demonstrate the direct economic benefits of the project:*

Nature of positions:	Number of existing positions:	Estimated number of new positions to be created:			
		Year 1	Year 2	Year 3	Total New
Direct permanent full-time jobs:					
Direct permanent part-time or seasonal jobs:					
How does the proposed funding help to sustain the existing positions <i>(if no new positions are to be created)</i> ?					

**9. Increased Revenue Generation and Operational Cost Savings**

✦ *The following will be reported on by the applicant organization for a three year period to demonstrate the direct economic benefits of the project:*

Current annual revenues:	Projected annual revenues		
	Year 1	Year 2	Year 3
\$	\$	\$	\$
<b>INCREASED REVENUE EXPECTED OVER THREE YEARS:</b>			\$
✦ <i>Incremental revenue expected is the sum of the <b>projected annual revenues</b> for the three years after the project, minus the <b>current annual revenues</b> over the same three year period.</i>			
Current costs:	Projected costs		
	Year 1	Year 2	Year 3
\$	\$	\$	\$
<b>COST SAVINGS EXPECTED OVER THREE YEARS:</b>			\$
✦ <i>Cost savings expected is the sum of the <b>projected costs</b> for the three years after the project, minus the <b>current costs</b> over the same three year period.</i>			

10. Project Timeline

Project start date:	Project completion date:

11. Consultant Information (if applicable)

Consultant name/consultant company name:	Telephone/email:

12. Project Budget

Expense item:	Amount (\$):	Vendor:	Verification:
	\$		Quote(s) attached
	\$		Quote(s) attached
	\$		Quote(s) attached
	\$		Quote(s) attached
	\$		Quote(s) attached
	\$		Quote(s) attached
	\$		Quote(s) attached
<b>TOTAL PROJECT BUDGET:</b>			<b>\$</b>

+ Complete the above, however if you wish to provide a more detailed project budget, please attach separately to this application.

+ Please refer to the [Northern Industries Innovation Fund Application Guide](#) for eligible and ineligible costs.

13. Funding Request

The following funding is requested from Northern Development:

Funding type:	Amount (\$):	
Grant	\$	+ Maximum allowable grant is 50% up to \$50,000 per project.



17. Authorization

I have read and understand the [Northern Industries Innovation Fund Application Guide](#) including the eligible and ineligible costs.

I confirm that the information in this application is accurate and complete, and that the project proposal, including plans and budgets, is fairly presented.

I agree that once funding is approved, any change to the project proposal will require prior approval of Northern Development Initiative Trust (Northern Development).

I agree to submit reporting materials as required by Northern Development, and as required, provide copies of any project deliverables (studies, reports, action plans, etc.) and financial accounting for evaluation of the activity funded by Northern Development.

I understand that the information provided in this application may be accessible under the Freedom of Information (FOI) Act. Northern Development will only report project information to the Board and/or to the public in aggregate form and will not disclose any confidential client information without permission or unless required by law.

I confirm that any confidential or proprietary information will be submitted on a separate document and is clearly labeled. I also confirm that no confidential or proprietary information is included in this application form.

I agree to publicly acknowledge funding and assistance by Northern Development.

I authorize Northern Development to make enquiries, collect and share information with such persons, firms, corporations, federal and provincial government agencies/departments and non-profit organizations, as Northern Development deems necessary for decision, administration, and monitoring purposes for this project.

I agree that information provided in this application may be shared with the appropriate regional advisory committee(s), board of directors, Northern Development staff, and consultants.

Name (organization signing authority): ✦ Please type name.	Position/title:	Date:
[Empty space for name]	[Empty space for position]	[Empty space for date]

18. Submitting Your Application

Completed funding applications (with all required attachments) should be provided electronically to Northern Development by email. ✦ Please do not scan this form (if possible).

Email: [info@northerndevelopment.bc.ca](mailto:info@northerndevelopment.bc.ca)