

Municipality of Grey Highlands <b>Corporate Policy</b>	Approved by Council: 2011-12-19 Amended by Council: 2017-11-27 Amended by Council: 2018-09-05
Policy No.: A09-F-04	<b>MUNICIPAL DONATION/GRANT POLICY</b>

## **PREAMBLE**

The Municipality of Grey Highlands recognizes the many benefits that various groups, organizations, volunteers and events within the Municipality provide by promoting and improving upon the cultural, social and economic well-being of the community. It is for this reason that the Municipality is committed to treating all requests for contributions in a consistent, fair and equitable manner subject to local needs, priorities, and Council's approved budget.

## **PURPOSE**

The purpose of this policy is:

- To establish, funding criteria and application procedures for requests for financial assistance from groups and organizations in the community of Grey Highlands;
- To provide Council and Staff with clear direction in considering and responding to requests for assistance;
- To secure an open and transparent decision-making process for requests for donations from Council;
- To provide an accessible and equitable process for groups and organisations seeking donations from Council.
- To establish an annual calendar for the processing of all donation requests.
- To provide a process which allows Council to conduct a meaningful comparison of requests for donations.
- To provide a process which allows the Council to maintain a more equitable distribution of Council donations.
- To enhance Council's appreciation and understanding of community groups operating in Grey Highlands.

## **POLICY**

It is the policy of the Municipality that Council will administer the Financial Assistance Program and consider requests to the regulations and criteria as set out in Appendix A attached to this Policy.

Council recognizes that many groups and organizations conduct events and provide programs that benefit the community. Generally, Council will consider requests for event and programs that:

- promote the welfare of the community;
- promote the health of the people and the community;
- promote the education and training for people within the community;
- promote the economic advancement of the community; or
- promote the cultural, heritage, social, or environmental well-being of the community.

Contributions will not be made for the following purposes:

- Discriminatory activities or events or those that would incite hatred towards any group;
- Activities that are contrary to the policies of the Municipality; or
- Activities which are deemed to be unlawful.

While Council will consider requests for contribution, there is no guarantee that a request will be approved.

## **FINANCIAL ASSISTANCE**

Includes requests for monetary contribution as well as municipally owned resources outlined as follows:

Municipally owned resources eligible for donation/grants include:

- Use of a municipally owned facility (rental fee waived/reduced)
- Municipal staff support (expertise) for an event (wages waived/reduced)
- Use of municipally owned equipment (rental fee waived/reduced)
- Use of municipally owned materials (rental fee waived/reduced)

## **GUIDELINES**

1. Council will invite applications for financial assistance by advertising in the local newspaper and on the Municipal Website during the month of September each year.
2. All requests for donations/grants should be directed in writing to the Mayor and Council of the Municipality of Grey Highlands through the completion of the Financial Assistance Program Application, attached as Appendix 'A', so that the request can be considered during budget deliberations.
3. All requests will be assessed based on availability of the requested resource, potential financial impact to the municipality, contribution to the well-being of members of the community, recognition of a worthwhile program/cause, and overall community impact.
4. Organizations and/or charities whose primary focus is not within the municipality shall not be considered for a municipal donation or grant.
5. The Financial Assistance Program is not intended to be the sole source of funding; the applicant must demonstrate a reasonable effort to raise funds from sources other than the Municipality of Grey Highlands.
6. Donations/grants made by the municipality are not to be regarded as a commitment by the municipality to continue such donations/grants in the future.
7. No donation or grant will be considered unless specifically authorized by Council in the form of a resolution of support.
8. In making donations/grants, the municipality may impose such conditions and/or restrictions as it deems fit. The municipality's decisions regarding donations/grants are final.
9. To be considered for the Financial Assistance Program all applications must be completed and submitted by the deadline, October 31st of each year.
10. Application form is available on the website at [www.greyhighlands.ca](http://www.greyhighlands.ca) or by calling the Municipal Office at 519.986.2811 or 1.888.342.4059.
11. Council may consider applications from Not for Profit Groups/ Organisations, outside the annual application process, if they are able to demonstrate that the purpose for which they are seeking the donation was not foreseen at the time of the annual process.

## **ELIGIBILITY**

1. Applicants must demonstrate the need for the specific request. Each request must identify a specific defined benefit and outcome. Each request must contain the date, hours, and requested municipal resource.
2. Applicants, with the exception of local elementary and secondary schools, must be non-profit community groups and organizations – individuals are not eligible. Applicants must provide the Municipality with their registration name and number on each request.
3. The municipality reserves the right to limit the number of donations/grants made to a particular organization in any given year.
4. Applicants must be located in the Municipality of Grey Highlands.
5. The Municipal Council's decisions regarding eligibility are final.

## **NOTIFICATION/ANNOUNCEMENTS**

1. All applicants will be notified whether their application was funded or rejected and the notification shall be accompanied by any reason for the application's rejection.
2. Recipient's names and amounts donated shall be publicized on a monthly basis on the Municipal Website. Recipients and amounts may also be advertised in the media.

## **REGULAR CONTRIBUTIONS**

Council has traditionally contributed to the following organizations and will continue to automatically contribute, on written request by the organization, as follows if no other contribution is made to the organizations:

- Grey County Farm Safety Association – \$150.00
- Osprey Museum - ~~\$750.00~~ a total sum equal to the annual total tax bill for the 2 properties, being 42 08 140 006 10900 0000 and 42 08 140 009 05000 0000, for the relevant year, to be funded from the Community Development Fund. (updated as per resolution 2018-441)
- Eugenia Goldrush - \$750.00
- ~~PLAY Committee~~ ~~\$300.00~~ removed as per resolution CoW17-329
- Markdale Santa Claus Parade - \$500
- Flesherton/Markdale Legion - ~~3 Wreaths for Remembrance Day (Flesherton, Markdale, Priceville)~~ Wreaths be provided as required or requested (updated as per Resolution CoW17-329)

The amounts of the memberships/contributions may be changed from time to time by the organization and/or can be reviewed from time to time and can be increased by Council if warranted.

**CAMPAIGNS, TAG DAYS, ETC.**

Council permission is not required to conduct Campaigns, Tag Days, etc.

**REQUESTS FOR ASSISTANCE OUTSIDE SCOPE OF POLICY**

Nothing in this policy prohibits Council from considering financial assistance or in kind support outside the scope of this policy. Council will consider each case on its merits and any assistance provided will be without precedent.



**MUNICIPALITY OF GREY HIGHLANDS**  
**Financial Assistance Program Year: \_\_\_\_\_**

**APPLICATION CHECKLIST**

**ONLY COMPLETE APPLICATIONS WILL BE CONSIDERED. PLEASE ENSURE YOUR APPLICATION INCLUDES ALL OF THE FOLLOWING:**

- Previous recipient of F.A.P. Grant; did you submit your final report?**
- Application Form completed, signed and dated, including Project / Event Budget Summary**
- List of Board of Directors / Organizing Committee including addresses**
- Current Year Budget**
- Most Recent Financial Statement, if available**

**NOTE:**

**Remember to keep a copy of your application and all attachments for your records.**

**PLEASE BE CONCISE!**

- **Use only the space provided**
- **Keep your answers brief**
- **Do not include information other than that requested**



# MUNICIPALITY OF GREY HIGHLANDS

## Financial Assistance Program Year: \_\_\_\_\_

### SECTION I

#### 1. APPLICATION ELIGIBILITY

The eligibility portion completed by the Applicant will be kept on file with the Municipality of Grey Highlands

**A. LEGAL NAME OF THE ORGANIZATION:**

Please list Board of Directors/Organizing Committee including addresses (Or attach)


**B. FULL LEGAL ADDRESS**

Street/Box				
Town	Province	Postal Code		

**C. TYPE OF ORGANIZATION:**

- ARTS/CULTURE  
 RECREATION/SPORTS  
 EVENT  
 OTHER-SPECIFY

**D. IS THE ORGANIZATION REGISTERED WITH REVENUE CANADA AS A CHARITY?**

- YES  
 NO

Provide registration date and number

**E. IS THE ORGANIZATION INCORPORATED AS A NON-PROFIT ORGANIZATION WITH MINISTRY OF CONSUMER AND BUSINESS SERVICES (ONTARIO)?**

- YES  
 NO

Provide registration date and number



**MUNICIPALITY OF GREY HIGHLANDS**  
**Financial Assistance Program Year: \_\_\_\_\_**

F. INDICATE YOUR ORGANIZATION'S FISCAL YEAR: FROM  TO

G. DESCRIBE WHO YOUR ORGANIZATION SERVES, I.E. WHO IS YOUR ORGANIZATION'S AUDIENCE


H. DESCRIBE YOUR ORGANIZATION'S MEMBERSHIP: INCLUDE THE NUMBER OF MEMBERS AND YOUR MEMBERSHIP FEES IF APPLICABLE.


I. WHO IN YOUR ORGANIZATION SHOULD WE CONTACT CONCERNING THIS APPLICATION:

J. Name:

K. TELEPHONE #:  (DAYTIME)  (EVENING)

L. E-MAIL:

M. ALTERNATE CONTACT FOR YOUR ORGANIZATION:

Name:

TELEPHONE #:  (DAYTIME)  (EVENING)

E-MAIL:



**MUNICIPALITY OF GREY HIGHLANDS**  
**Financial Assistance Program Year: \_\_\_\_\_**

**N. F.A.P. APPLICATION SIGNATURE:**

We the undersigned, declare that all information provided in and with this statement is factual and correct. *\*\*Please refer to the Municipal Freedom of Information and Protection of Privacy Act section 8.8(1) for disclosure information*

\_\_\_\_\_  
Print name of Principal Officer

\_\_\_\_\_  
Print name of Principal Officer

\_\_\_\_\_  
Signature of Principal Officer

\_\_\_\_\_  
Signature of Principal Officer

\_\_\_\_\_  
Title

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date



# MUNICIPALITY OF GREY HIGHLANDS Financial Assistance Program Year: \_\_\_\_\_

## SECTION II

### 2. FUNDING DETAILS

A. AMOUNT OF GRANT REQUEST: \$

(Includes the total request for financial assistance, both monetary and municipal resources – refer to Financial Assistance Section of Policy)

B. SELECT THE TYPE OF PROJECT OR EVENT YOU ARE APPLYING FOR:

- Council Grant     One-Time Event     Seed Funds     Unique Need

C. BRIEFLY DESCRIBE YOUR PROJECT IN THE SPACE PROVIDED:


D. RECAP OF PREVIOUS YEAR'S ACTIVITIES:

Please list and describe the specific programs and services delivered by the Organization


E. FUNDING RECAP OF PREVIOUS GRANT/S:

i. Did your organization receive any Grey Highlands grants in the last two (2) years?  
 Yes  No (If NO go to line D)

ii. If YES please indicate the year, source and amounts.

- YEAR 20\_\_AMOUNT                       YEAR 20\_\_AMOUNT



# MUNICIPALITY OF GREY HIGHLANDS

## Financial Assistance Program Year: \_\_\_\_\_

iii. How did your organization use the funding noted above?


iv. Did you receive funding from sources other than the municipality last year?  YES  NO

v. If YES indicate the source of funding and amount (i.e. service club, local organization, provincial/federal grants).

SOURCE

AMOUNT

SOURCE	AMOUNT

### 3. PROJECT/EVENTS DETAILS:

A. Briefly describe your Project/Event:


B. Tell us how the municipal funding you have requested will be used:

i. How will the grant assist your activities?






## FINANCIAL ASSISTANCE PROGRAM - APPLICATION PROJECT / EVENT BUDGET SUMMARY

Please complete the following form specifically summarizing project or event budget.

**PLEASE FILL ONLY PORTIONS THAT APPLY.**

PROJECT / EVENT TIMEFRAME	FROM (date):		TO (date):		
EARNED REVENUE	\$ AMOUNT	FUNDRAISING	\$ AMOUNT	EXPENDITURES	\$ AMOUNT
Subscriptions		Donations		Salaries	
Admissions		Grants		Production / Exhibition	
Service Fees		Other (Specify)		Office / Administration	
Memberships		<b>TOTAL FUNDRAISING REVENUE (B)</b>		Marketing	
Workshops		<b>REVENUE FROM GOVERNMENTS</b>	\$ AMOUNT	Equipment	
Bar / Food / Concessions / etc		Municipality of Grey Highlands		Transportation	
Endowment/ Bank Interest		Other Municipalities		Supplies	
Other (Specify)		Provincial		Subsidy	
		Federal		Other	
		Other (Specify)			
<b>TOTAL EARNED REVENUE (A)</b>		<b>TOTAL GOVERNMENT REVENUE (C)</b>		<b>TOTAL EXPENDITURES (D)</b>	

BUDGET OVERVIEW:	PROJECT / EVENT REVENUE	\$ AMOUNT	TOTAL EXPENDITURES (D)	\$ AMOUNT
	TOTAL EARNED REVENUE (A)			
	TOTAL FUNDRAISING REVENUE (B)			
	TOTAL GOVERNMENT REVENUE (C)		<b>SURPLUS (DEFICIT) E - D</b>	<b>\$ AMOUNT</b>
	<b>TOTAL PROJECT / EVENT REVENUE (Add A + B + C = E)</b>			