



## Capital applications must comply with the following criteria:

- Must **not** be a for profit group
- Must support at least one of the Healthy Community priorities identified below
- Must benefit the residents of the Ward and contribute to a facility or service which is available to residents at a minimum or no cost
- Must be in line with the Parks, Open Space and Leisure Master Plan
- Must be a City infrastructure/facility
- Must have demonstrated community support (letters of support, committed partners)

Note: Capital applications in excess of \$10,000.00 require Council approval

Date of	Application:	Ward:
Project:		Location of Project:
Allocati	on Requested:	
Organiz	zation Name: (confirm organization is <b>not</b> a for profit organi	zation)
Mailing	Address:	
Main Co	ontact Person:	
Main Co	ontact Phone #:	
Main Co	ontact Email:	
Please	describe the project clearly:	
	check all priorities impacted by this application.	
	Contribute towards <b>human health and well-being</b> and a Examples include; trails, park enhancements, beautification of	
	Support <b>environmental sustainability</b> and building heal <i>Examples include; neighbourhood clean ups, tree planting, c</i>	
	Initiatives which <b>encourage civic engagement and volu</b> Examples include; neighbourhood events, volunteer recognit	· · · · · · · · · · · · · · · · · · ·
	Initiatives which support economic vitality and help con	stribute to a strong local economy

Please indicate how the project supports at least one of the priorities of a Healthy Community (see above). Identify the benefit(s) which this project holds for the residents of the Ward.					
Please	check applicable eligible expenditure categories				
	In-kind donations - describe:				
	Amount of money raised:				
	Community Partners:				
	Support from other levels of Government:				
	Letters of support:				
Please	submit the completed form to Community Partnerships	s via:			
Email:	hci@greatersudbury.ca	In person	to your local Citizen Service Centre or Tom Davies Square (200 Brady Street)		
Fax:	705-671-8145	Ear inquiries	please contact 705-674-4455, x2448		
Mail:	PO Box 5000 / CP 5000 STN A / SUCC A 200 Rue Brady Street Sudbury, ON P3A 5P3	ror inquiries,	piease contact 705-674-4455, x2446		
Office	Use Only				
Appro	oval Section (SELECT one or the other)	☐ Denied			
Appro	ved by G.M:		Date:		
Verif	dhu		Data		
verme	ed by:		Date:		