

Instructions

This section provides information on how to complete and submit your application. Users of this application may also hover their cursor over any heading to learn more about the requirements.

How To Complete The Application

Before filling out the application, read the entire Community Transportation Grant Program – Municipal Stream Application Guidelines and Requirements 2017 (Guide). It may be useful to print a copy of the Guide to refer to while completing the application. The CT Program provides two levels of funding. This form is to be used to apply for either or both levels of funding. Applicants must submit the complete application package online through the Grants Ontario System to be considered for funding.

The complete application package consists of this Grants Ontario Application Form and the attachments listed below. The Grants Ontario Application Form and its attachments must be submitted to the Grants Ontario System separately. For greater clarity, although submitted separately, the declaration/certification in Section Z (Declaration/Signing) of the Grants Ontario Application Form also applies to its three attachments.

Information about eligible applicants and eligible projects are detailed in the Guide.

Note that Ministry consideration of an application does not guarantee funding. Applications will be assessed on the basis of the information provided by the applicant within the completed application forms, and by the applicant's ability to achieve the objectives of the program.

The Ministry cannot guarantee funding to all applicants, nor can the ministry ensure that the total amount requested by successful applicants will be granted. The ministry reserves the right, in its sole discretion, to fund or not fund any particular project or program for which an application is submitted. The decision to fund all or part on an applicant request will depend on its fit to the program priorities, assessment criteria and the overall demand of funds in the program.

Attachment, Requirements Checklist

- A. Community Transportation Grant Program – Municipal Stream Application Form (PDF)
- CT Project Budget (Excel)
- CT Project Work Plan (Word)
- Letters of Support (For long-distance CT Projects)

Grant Case # 2018-02-1-753270212

Section A - Organization Information

This section displays general information about your organization submitted during the Grants Ontario enrolment process. To make a change to this information, please submit an Assistance Request through the Grants Ontario System. Once the change has been made, all future reports will include the updated information.

1. Organization Name: The City of Stratford		2. Organization Legal Name: The Corporation of the City of Stratford	
3. Web Site URL: www.stratfordcanada.ca			
4. Type of Legal Entity: Municipality		5. Year Established: 1854	6. Date Incorporated:
7. Corporation Registration Number: 65101		8. Date of last AGM: 	9. Date of Next AGM:
10. Organization Mandate: Community Excellence with Worldwide Impact			

Section B - Organization Address Information

This section displays address information about your organization submitted during the Grants Ontario enrolment process. To make a change to this information, please submit an Assistance Request through the Grants Ontario System. Once the change has been made, all future applications will include the updated information.

Primary Address:

1. Street address 1: PO Box 818		
2. Street address 2: 1 Wellington St.		
3. City: Stratford	4. Province: Ontario	5. Postal Code N5A6W1

Mailing Address:

6. Street address 1: PO Box 874		
7. Street address 2:		
8. City: Stratford	9. Province: Ontario	10. Postal Code N5A6W3

Section C - Organization Contact Information

Information about key people in the organization, including whether they have signing authority or not. Note that only the first group of contact fields are mandatory. All other types of contacts are optional.

Organization Contact

General contact for the organization. The person who should receive general information from the Ministry including notification of grant opportunities, deadlines and news releases.

1. * Salutation: Mr.	2. * First Name: Michael	3. * Last Name: Humble	4. * Title: Director of Corporate Services
5. * Phone Number (Work): (519) 271-0250 x201		6. Phone Number (Mobile):	7. * Email Address: mhumble@stratford.ca

8. Signing Authority (Does this person have signing authority for your organization?)

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Most Senior Official

This is the most senior elected or appointed official with whom a Minister of the Crown would correspond with (i.e. Mayor, Board Chair, Reeve, Chief, CEO)

9. Salutation: Mr.	10. First Name: Dan	11. Last Name: Mathieson	12. Title: Mayor
13. Phone Number (Work): (519) 271-0250 x236		14. Phone Number (Mobile):	15. Email Address: pshantz@stratford.ca

16. Signing Authority (Does this person have signing authority for your organization?)

Other Senior Staff

This is the most senior member of the organization aside from the person listed as Most Senior Official (i.e. CEO, Executive Director).

17. Salutation: Mr.	18. First Name: Rob	19. Last Name: Horne	20. Title: Chief Administrative Officer
21. Phone Number (Work): (519) 271-0250 x233		22. Phone Number (Mobile):	23. Email Address: rhorne@stratford.ca

24. Signing Authority (Does this person have signing authority for your organization?)

Other Contact 1

Any other person with whom the Ministry might wish to contact or additional signing authorities e.g. Treasurer, CFO or Vice Chair

25. Salutation: Mr.	26. First Name: Michael	27. Last Name: Humble	28. Title: Director of Corporate Services & Treasurer
29. Phone Number (Work): (519) 271-0250 x201		30. Phone Number (Mobile):	31. Email Address: mhumble@stratford.ca

Signing Authority (Does this person have signing authority for your organization?)

Other Contact 2

Any other person with whom the Ministry might wish to contact or additional signing authorities e.g. Treasurer, CFO or Vice Chair

33. Salutation: Mrs.	34. First Name: Wendy	35. Last Name: Partridge	36. Title: Administrative Assistant (Corporate Services)
37. Phone Number (Work): (519) 271-0250 x202		38. Phone Number (Mobile):	39. Email Address: wpartridge@stratford.ca

40. Signing Authority (Does this person have signing authority for your organization?)

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Section E - Grant Payment Information

Should your application be successful, this information will be used to make payments.

Payment Address:

Please select your organization's payment address from the drop-down list below. Once selected, the payment address fields below will be populated with the information related to the selected address. If your organization's payment address does not appear in the drop-down list, please complete the fields below manually.

1. Payment Organization: CITY OF STRATFORD | 1 WELLINGTON ST PO BOX 818

2. * Payment Organization Name (maximum 100 characters)

CITY OF STRATFORD

3. * Street Address 1:

1 WELLINGTON ST PO BOX 818

4. Street Address 2:

5. * City:

STRATFORD

6. * Province:

Ontario

7. * Postal Code

N5A 6W1

Payment Contact:

Individual who should be contacted for clarifications about banking information or financial matters

8. * Salutation: Mrs.	9. * First Name: Wendy	10. * Last Name: Partridge	11. * Title: Administrative Assistant (C)
12. * Phone Number (Work): (519) 271-0250 x202		13. Phone Number (Mobile):	14. Fax Number: (519) 271-4357
15. * Email Address: wpartridge@stratford.ca			

16. * Method Of Payment

Electronic Fund Transfer

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Section F - Application Contact information

This is the person who will be the sole contact responsible for all communication with the Ministry in regard to this application.

1. * Salutation: Mr.	2. * First Name: Michael	3. * Last Name: Humble	4. * Title: Director of Corporate Ser
5. * Phone Number (Work): (519) 271-0250 x201		6. Phone Number (Mobile):	7. Fax Number: (519) 271-4357
8. * Email Address: mhumble@stratford.ca			

Section Z - Declaration / Signing

Applicants are expected to comply with the *Ontario Human Rights Code* (the “Code”) and all other applicable laws (<http://www.ohrc.on.ca/en/ontario-human-rights-code>). Failure to comply with the letter and spirit of the *Code* will render the applicant ineligible for a grant and, in the event a grant is made, liable to repay the grant in its entirety at the request of the Ministry.

Applicants should be aware that Government of Ontario institutions are bound by the *Freedom of Information and Protection of Privacy Act, R.S.O. 1990, c.F.31* (<http://www.ipc.on.ca/index.asp?navid=73>), as amended from time to time, and that any information provided to them in connection with this application may be subject to disclosure in accordance with that Act. Applicants are advised that the names and addresses of organizations receiving grants, the amount of the grant awards, and the purpose for which grants are awarded is information made available to the public.

Declaration

The Applicant hereby certifies as follows:

- (a) the information provided in this application is true, correct and complete in every respect;
- (b) the Applicant understands any funding commitment will be provided by way of an approval letter signed by the responsible Minister and will be subject to any conditions included in such a letter. Conditions of funding may include the requirement for a funding agreement obligating the funding recipient to report on how the funding was spent and other accountability requirements;
- (c) the Applicant has read and understands the information contained in the Application Form;
- (d) the Applicant is aware that the information contained herein can be used for the assessment of grant eligibility and for statistical reporting;
- (e) the applicant understands that it is expected to comply with the *Ontario Human Rights Code* and all other applicable laws;
- (f) the Applicant understands that the information contained in this application or submitted to the Ministry in connection with the grant is subject to disclosure under the *Freedom of Information and Protection of Privacy Act*;
- (g) the Applicant is not in default of the terms and conditions of any grant, loan or transfer payment agreement with any ministry or agency of the Government of Ontario;
- (h) I am an authorized signing officer for the Applicant.

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Mr. Michael Humble
 Director of Corporate Services
 (w): (519) 271-0250 x201
 (c):
 E-mail: mhumble@stratford.ca

Mr. Dan Mathieson
 Mayor
 (w): (519) 271-0250 x236
 (c):
 E-mail: pshantz@stratford.ca

Michael Humble

Feb 28, 2018

Signature

Date/Time Field

Dan Mathieson

Feb 28, 2018

Signature

Date/Time Field

Mr. Rob Horne
 Chief Administrative Officer
 (w): (519) 271-0250 x233
 (c):
 E-mail: rhorne@stratford.ca

Mr. Michael Humble
 Director of Corporate Services & Treasurer
 (w): (519) 271-0250 x201
 (c):
 E-mail: mhumble@stratford.ca

Rob Horne

Feb 28, 2018

Signature

Date/Time Field

Michael Humble

Feb 28, 2018

Signature

Date/Time Field

Additional Signing Authority:

Salutation: Mr.	First Name: Rob	Last Name: Horne	Title: Chief Administrative Officer
Phone Number (Work): (519) 271-0250 x233		Phone Number (Mobile):	Email Address: rhorne@stratford.ca

Rob Horne

Feb 28, 2018

Signature

Date/Time Field