Nova Scotia Forestry Innovation Transition Trust **Application for funding—organizations**

Project number	
(for official use)	

If you are an individual seeking funding for training, complete the **Application for funding—individuals.** Complete all sections as accurately as possible. The FITT secretariat office will only consider applications that have been completed in full.

A) Applicant Profile		
1. Applicant Information:		
Legal name of applicant:		
Operating name, if different:		
Mailing and courier address:		
City/town	Province	Postal code
Business number / HST number:	Current num	ber of full-time employees:
Website address:		
2. Primary Contact:		
Name:	Title:	
Telephone number: Business	Other/0	Cell
Fax number:		
3. Type of Organization:		
sole proprietorship or partnership	☐ not-for-profit organization	☐ post-secondary institution
incubator, accelerator, or makerspace	☐ incubator, accelerator, or makerspace ☐ research institution	
□ other (specify):		
Briefly describe the organization's principal a	activities (products and/or service	s provided):

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B)	Project Information		
1)	Physical location of the project:	 	
2)	Project name:	 	
3)	List project and program key stakeholders:		
4)	Briefly describe the project:	 	
5)	Estimated total project costs:	\$	
6)	Amount requested from the Nova Scotia Forestry Innovation Transistion Trust (FITT):	\$ 	
7)	Is your organization currently receiving other grant or trust funding?	☐ Yes	☐ No
8)	Has your organization made any financial or legal commitments for the project?	☐ Yes	☐ No
9)	If yes to 8 above, provide details:		

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$Nova Scotia Forestry Innovation Transition Trust \ \ \boldsymbol{Application for funding-organizations}$ 10) Estimated start date of project (yyyy/mm/dd): 11) Estimated completion date (yyyy/mm/dd): C) Project Alignment Projects will be evaluated based on the robustness of the proposal, inclusion of success measures, an evaluation plan and consultation plan where appropriate, in addition to the specific evaluation criteria in the table below. Briefly describe how your project aligns with these criteria: Whether your project meets FITT's purposes (see application guide), contributes to improved social and economic outcomes, and supports inclusive economic growth in the forestry and biological resources sectors. How your project contributes to creating new knowledge in the forestry and biological resources sectors. How much incremental benefit is created by your project as a result of funding from the trust, including potential to leverage further investment from non-provincial sources.

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How your project considers new and innovative ways of doing things across the forestry sector.
How your project builds upon partnerships and collaborations among institutions, government departments and agencies, the forestry sector, foundations, and other private sector organizations, to advance FITT's purposes (see application guide).
What impact your project will have on the forestry and biological resources sectors in Nova Scotia.
Trinat impact your project tim have on the forestly and storogream resources sections in mova section
How you will evaluate the success of your project.

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		able laws, including Canada's trade ol e, and Nova Scotia's existing exempti	-
	o partici	y model in private woodlots in Nova pate in eco-forestry, builds efficiencie vity in the use of equipment.	, , ,
Section reserved for companies and pa	rtnership	os. Other applicants, go directly to sect	ion E.
1) Provide information about the pr			
Surname		Given name	Percentage of ownership
Is the person active in the company? Yes No	If yes, in	what position/role?	
Surname		Given name	Percentage of ownership
Is the person active in the company? Yes No	If yes, in	what position/role?	

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Given name

Is the person active in the company? | If yes, in what position/role?

Percentage of ownership

Surname

☐ Yes ☐ No

Surname	Giver	n name	Percentage of ownership
Is the person active in the company? Yes No	If yes, in what	position/role?	
Surname	Giver	n name	Percentage of ownership
Is the person active in the company? Yes No	If yes, in what position/role?		
2) Provide the name(s) of any parer	nt company, su	bsidiaries, and of any a	affiliated or related business entities.
Name of the business		Nature of the relat	ionship
City/town	Contact perso	on	Telephone no.
Name of the business		Nature of the relat	ionship
City/town	Contact perso	on	Telephone no.
Name of the business		Nature of the relat	ionship
City/town	Contact perso	on .	Telephone no.
Name of the business		Nature of the relat	ionship
City/town	Contact perso	on	Telephone no.
E) Governance and Manage 1) List the directors/members of the		ne key management pe	ersonnel of the applicant.
Surname	Giver	n name	Years of service
Is the person active in the company? Yes No	Title/position		
Surname	Giver	n name	Years of service
Is the person active in the company? Yes No	Title/position		1

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Surname			Given name Years			Years of s	ears of service		
Is the person ac	sition								
Surname			Given name			Years of s	ervice		
Is the person ac Yes No	tive in the company?	Title/po	sition						
Surname			Given name			Years of service			
Is the person ac Yes No	tive in the company?	Title/po	sition						
Surname			Given name			Years of s	ervice		
Is the person ac Yes No	tive in the company?	Title/po	sition						
2) Provide the	names of profession	al adviso	rs FITT may contac	t to i	nquire about	the applica	ant.		
Service Provide	r Nam	e	City/Town		Contact	Person	Telepho	ne No.	
Accountant									
Lawyer									
Insurance comp	pany								
Consultant									
Other									
to inquire a	name and contact ir bout the applicant.	,		,		T may con			
Institution		City/tov	City/town		Contact person		Telephone no.		
Describe availab	ole credit								
F) Required	Information ar	nd Doci	uments						
1) Financial st	atements (current and	d last thre	e years)				☐ Yes	☐ No	
 Complete project proposal (see the Application and Proposal Guidelines for instructions on completing a project proposal) 						☐ Yes	☐ No		
consent to c	Notice: quire further informati collect personal inforn when requested or Fl	nation fro	m officials associate	ed wi	th the applicat	,			

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G) Disclosures

1.	Environment				
	Do the applicant's current operations conform with federal and provincial environmental legislation?		Yes		Nο
	Will the proposed project conform to environmental legislation?		Yes		
2	Crown duty to consult				
۷.	Are there indigenous groups or communities in or near the project area?		Yes		No
	Could the project potentially impact indigenous groups or communities?		Yes		
3.	Litigation				
	Is the applicant involved in any relevant litigation, legal action, suit, or claim pending or underway, or any other proceedings before any court, tribunal, government board or agence	су?	☐ Ye:	s 🖵	No
	Are there any judgments outstanding against the applicant?		Yes		No
4.	Material contracts				
	Is the applicant in default under any contract or any financing arrangement?		Yes		No
5.	Taxes				
	Is the applicant in arrears in the payment of any income, business or property taxes, sales taxes, or any other form of taxes?		Yes		No
6.	Other government funding				
	Has the applicant received or sought any government funding for this project?		Yes		No
lf y	you answered "no" to question 1 or "yes" to any other question, please provide details:				
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H) Consent and Certification

- 1. I understand that the information I have entered here and on all attached documents, as well as any other information collected by or on behalf of the Nova Scotia Forestry Innovation Transition Trust (FITT) to process this application for grants and contributions, is collected in accordance with the FITT Trust Indenture.
- 2. I understand that the Trustees are the independent administrators of the FITT. The Trustees may appoint advisors or advisory groups, committees, or bodies to assist in reviewing the information I have submitted.
- 3. I acknowledge that the Freedom of Information and Protection of Privacy Act applies to the information collected through this application.
- 4. I acknowledge that the information collected through this application may be disclosed to departments or agencies of the provincial or federal governments for the purpose of administering FITT. I understand that personal information regarding representatives of organizations is not used for administrative purposes at any time during the processing of FITT applications; it is used solely to support my organization's application. Information collected may also be used for policy analysis, research and/or evaluation, promotion and communication purposes. I further understand that failure to provide all requested information may result in this application not being considered.
- 5. I acknowledge that the project submitted for funding will be assessed to ensure it complies with applicable provincial and federal laws and regulations.
- 6. I certify that the information provided is, to the best of my knowledge and ability, complete, true, and correct; and that this will apply to all information I provide in the future in connection with the assessment of this project. Furthermore, I will promptly notify FITT if any of the information changes.
- 7. I acknowledge that FITT may contact any person listed in this application to inquire about me/my organization and/or this application. I authorize FITT to make any inquiries required, including obtaining corporate and business information, to assess this application. I authorize FITT to inquire with any persons; firms; corporations; federal and provincial government departments, agencies, authorities; institutions; and non-profit economic development organizations, and consent to the collection of information.
- 8. I consent to FITT using the information supplied here for determining funding approval, policy analysis, research and/or evaluation, as well as promotion and communication of FITT.
- 9. I acknowledge that I will be required to execute a contribution agreement as a condition of receiving funds from the FITT.

I have read and understood the above. I have the authority to bind the applicant, and on its behalf, I voluntarily consent to the collection, use, and disclosure of information as described.

Signature of authorized official:	Signed at (location):	
Print name and title of authorized official:		
On this	. day of	, 20
(Please keep a signed copy of this form for your rec	ords.)	

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I) Contact Information and Submission Instructions

Program inquiries and application may be directed to the Forestry Innovation Transition Trust Secretariat at FITT@novascotia.ca

How to Submit your Application and Proposal

Physical copies of applications and supporting documentation will not be accepted.

Submit your application and proposal, including any supporting documents, one of two ways:

1. Email to FITT@novascotia.ca

You will receive a confirmation of receipt within two business days.

2. USB drive

Deliver the USB drive in person to the address below, or mail it using traceable delivery (registered mail or courier).

Ensure the USB drive is password protected. Send the security information to FITT@novascotia.ca

Nova Scotia Department of Inclusive Economic Growth Attention: Forestry Innovation Transition Trust Secretariat c/o Forestry Innovation Transition Trust 1809 Barrington Street (CIBC Building), Suite M103 Halifax, Nova Scotia Canada B3J 3K8

You will receive a confirmation of receipt within two business days.

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