REPORT and CLAIM FORM for GRANTS

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Check as appropriate: | Capital Grant | | Properties Inspection Grant | | | | | Arborist Grant | |
| Name of project: |  | | | | Area: | |  | | |
| Date project approved: |  | Start Date: | |  | | Completion date: | | |  |

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| **PROJECT REPORT** (Provide a brief report of project activities and outcomes, noting any changes from the original outline, below. Attach photos of completed project where appropriate.) |
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| **PROJECT CLAIM** (Provide copies of all paid invoices and receipts for materials and/or labour, along with copies of cancelled cheques for those payments. (For claim purposes 50% of the total GST on attached receipts and invoices that display the supplier’s GST number will be reimbursed). |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **EXPENSES** | | | | |
| **Paid To** |  | **Amount Paid**  (Including Taxes) |  | **GST**  (included in total) |
|  |  |  |  |  |
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|  |  |  |  |  |
|  |  |  |  |  |
| **Subtotal** of attached receipts/Invoices**:** |  |  |  |  |
| **Less 50% GST:** |  | (     ) |  |  |
| **Total:** |  | $ |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| An amount up to the maximum of the approved grant will be paid upon receipt of this fully completed and signed form. | | | | |
| Amount Requested  (no greater than 50% of total): | $ | Amount Previously Approved: | | $ |
|  | | | | |
| Progress payment requests | Final request | Date: |  | |
|  | | | | |
| Cheque payable to: |  | | | |

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| --- | --- | --- |
| **Project Chair** | | |
|  |  |  |
| *Name* | *Signature* | *Council Name* |
| **Commissioners for councils responsible for property** | | |
|  |  |  |
| *Name* | *Signature* | *Council Name* |
|  |  |  |
| *Name* | *Signature* | *Council Name* |
| **Area Commissioner(s) (if property is District-managed)** | | |
|  |  |  |
| *Name* | *Signature* | *Council Name* |