



Curve Lake

Gaming Revenue Fund

APPLICATION FORM

The Application Form provides specific detailed description of the project including financial projections with quotes. Please review the Guidebook prior to completing the Application Form to ensure all eligibility criteria has been considered.

PROJECT TITLE : _____

Curve Lake Gaming Revenue Fund

22 Wiinookeedaa Road

Curve Lake, ON K0L 1R0

Email: gamingrevenuefund@curvelakefn.ca

Phone: (705) 657-8045

PART A: APPLICANT INFORMATION

LEAD APPLICANT	
PROJECT TITLE	

If your Applicant or Project information has changed since the approval of your *Statement of Intent*, please advise the Administrator. Unless otherwise advised by the Lead Applicant, this information will be processed as part of the Application which is a detailed extension to the project information provided on the Statement of Intent.

PROJECT COSTS:

PART B: PROJECT COSTS

REVENUE		EXPENSES	
10%EQUITY CONTRIBUTION	\$	CAPITAL PURCHASES	\$
OTHER FUNDING SOURCES	\$	EQUIPMENT RENTAL	\$
GAMING REVENUE FUND	\$	PROFESSIONAL SERVICE FEES	\$
OTHER _____	\$	OTHER _____	\$
TOTAL	\$	TOTAL	\$

TOTAL AMOUNT OF FUNDING REQUESTED

\$

Please list any other funding sources approached and / or exhausted for this project (letters required with Application submission):

FUNDING SOURCE	AMOUNT	STATUS	LETTER PROVIDED

Note: Funding received but not required to complete the project must be reimbursed to the Gaming Revenue Fund. In the event that the projected costs exceed the amount of funding issued, it will be the responsibility of the Applicant to offset the costs.

CURVE LAKE GAMING REVENUE FUND—APPLICATION FORM

PLEASE PROVIDE 3 QUOTES FOR EACH PROPOSED COST REQUIRED FOR YOUR PROJECT.

Item Description	Quote #1		Quote #2		Quote #3	
	Company Name	Quote	Company Name	Quote	Company Name	Quote
	Company Name	Quote	Company Name	Quote	Company Name	Quote
	Company Name	Quote	Company Name	Quote	Company Name	Quote
	Company Name	Quote	Company Name	Quote	Company Name	Quote
	Company Name	Quote	Company Name	Quote	Company Name	Quote
	Company Name	Quote	Company Name	Quote	Company Name	Quote
	Company Name	Quote	Company Name	Quote	Company Name	Quote

CURVE LAKE GAMING REVENUE FUND—APPLICATION FORM

Please indicate the depreciation schedule (life cost cycle) of any major assets to be purchased or built:

Please identify any ongoing operating or maintenance costs that will be required for this project:

Please identify the costs associated with any qualified personnel (on / off reserve) needed to help you in the delivery of your project objectives (we encourage support of local on reserve contractors):

PART E: PROJECT OBJECTIVES

You have indicated that the project will be completed within one year of approval. Please provide a detailed schedule of activities/objectives with expected completion dates. This information will be used as a reporting guide should your project be approved.

DESCRIPTION OF ACTIVITY	EXPECTED COMPLETION DATE

Summarize the benefits expected from funding this project (i.e., health and safety, training, involvement of community members, environmental effects, cultural preservation, improved use of land and resources, etc.):

CURVE LAKE GAMING REVENUE FUND—APPLICATION FORM

Regulatory Issues: Please identify specific regulations and approval requirements that affect the development or operation of this project:

FOR DEPARTMENTS AND / OR COMMITTEES

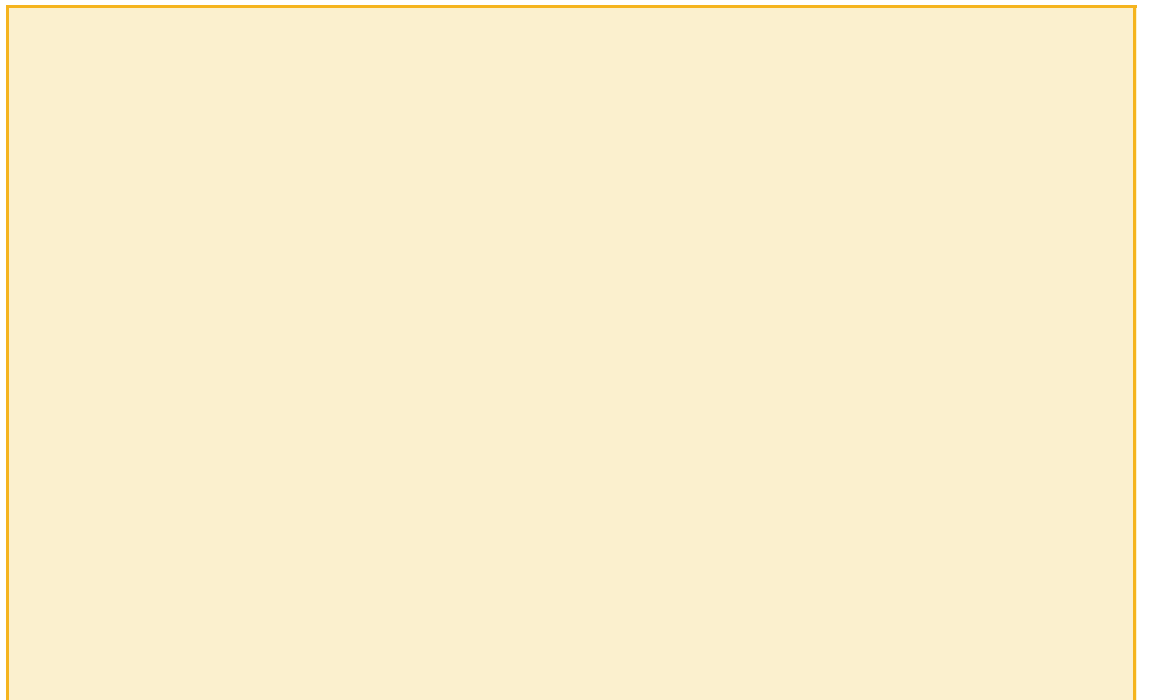
Please indicate your Department / Committee's typical programs and / or activities

Who in the Community normally participates / benefits from your programs and services?

What other community members or groups would also benefit from the completion of your project?

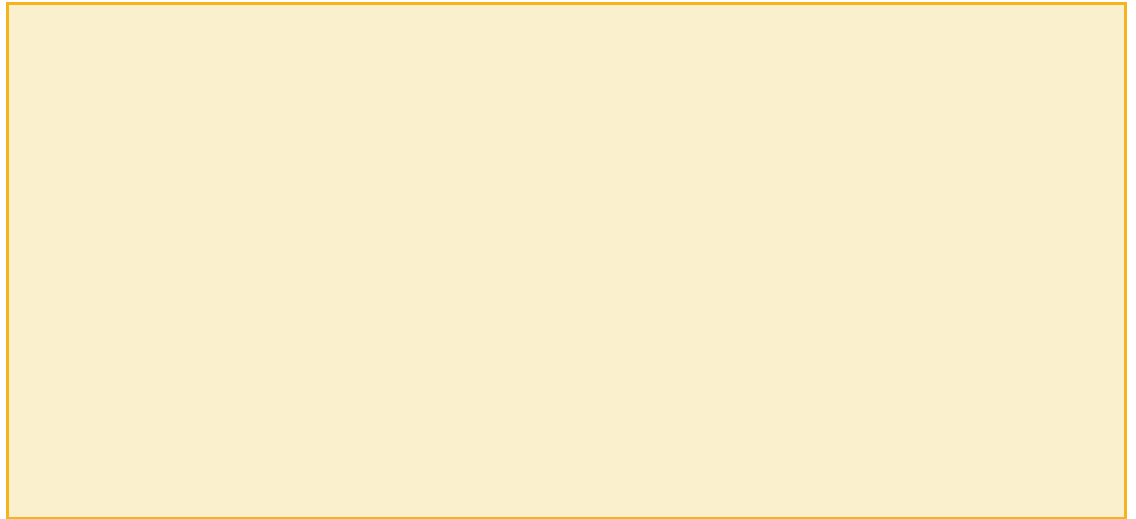


How is this project / activity unique from other or similar programs / activities currently in place within your organization?



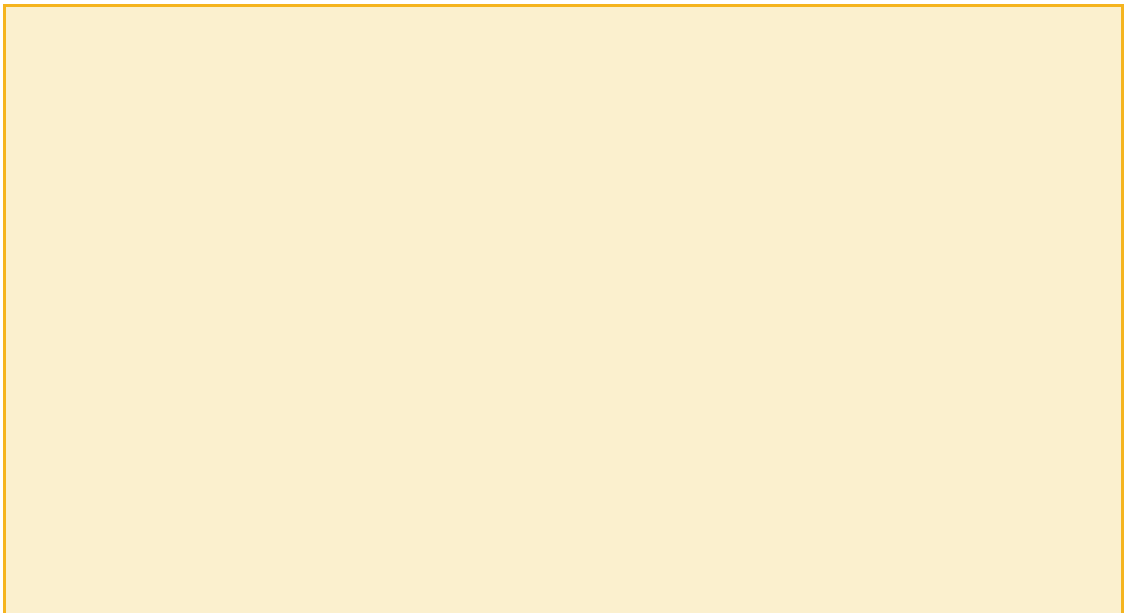
PART D: RECOGNITION OF GRF CONTRIBUTIONS

As part of the project approval process, each Applicant is required to demonstrate recognition to the Gaming Revenue Fund for their contributions towards their Approved project. Should your project be approved, please describe how you will acknowledge the contribution of the Gaming Revenue Fund.



ADDITIONAL COMMENTS:

Please use the space below to provide any pertinent information required to ensure that the GRF Committee can make an accurate and informed decision regarding your application.



PART E: CERTIFICATION AND AUTHORIZATION

- I certify that the information in this Application Form is correct, to the best of my knowledge;
- I understand the purpose of the Application Form is to assess eligibility of the Applicant and the Project;
- I understand that the Gaming Revenue Fund is obligated to report all project information to Chief and Council and to the Community;
- I authorize the Gaming Revenue Fund Administrator to verify information provided on the Application Form to accurately assess Project and Applicant eligibility.

Name of Lead Applicant <i>(please print)</i>	Signature	Date
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For Office Use Only:	
Date Received by GRF Administrator	
Date Reviewed by GRF Administrator	
Date Reviewed by GRF Committee	
Committee Decision	
Approval Amount	
Signature of GRF Committee Chairperson	
Date Applicant Notified of Results	

Curve Lake First Nation Community Gaming Revenue Fund
22 Wiinookeedaa Road Curve Lake, ON K0L 1R0

Email: gamingrevenuefund@curvelakefn.ca

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Fax: (705) 657-8708