



# Curve Lake Gaming Revenue Fund

## INDIVIDUAL STATEMENT OF INTENT

The Statement of Intent is used to assess applicant and project eligibility. Please review the GRF Applicant Guidebook prior to completing this form to ensure all criteria has been considered.

**PROJECT TITLE:** \_\_\_\_\_

**Curve Lake Gaming Revenue Fund  
22 Winookeedaa Road  
Curve Lake, ON K0L 1R0  
Email: [gamingrevenuefund@curvelake.ca](mailto:gamingrevenuefund@curvelake.ca)  
Phone: (705) 657-8045  
Fax: (705) 657-8708**



## PART A: INDIVIDUAL APPLICANT ELIGIBILITY

<b>NAME</b>	
<b>ADDRESS</b>	
<b>PHONE #</b>	
<b>EMAIL</b>	
<b>DATE OF BIRTH</b>	
<b>CLFN STATUS #</b>	

Would you be willing to provide a credit check? YES  NO

Do you currently have outstanding debts with CLFN? YES  NO

Is this your first time applying to the Gaming Revenue Fund? YES  NO

*(preference will be given to first time applicants)*

## PART B: PROJECT ELIGIBILITY (Page 1 of 3)

PLEASE FILL IN THE FOLLOWING INFORMATION TO DETERMINE PROJECT ELIGIBILITY:

<b>PROJECT TITLE</b>	
<b>PROPOSED START DATE</b>	
<b>PROPOSED COMPLETION DATE</b>	
<b>PROJECT LOCATION</b>	

PROJECT CATEGORY (please check one):

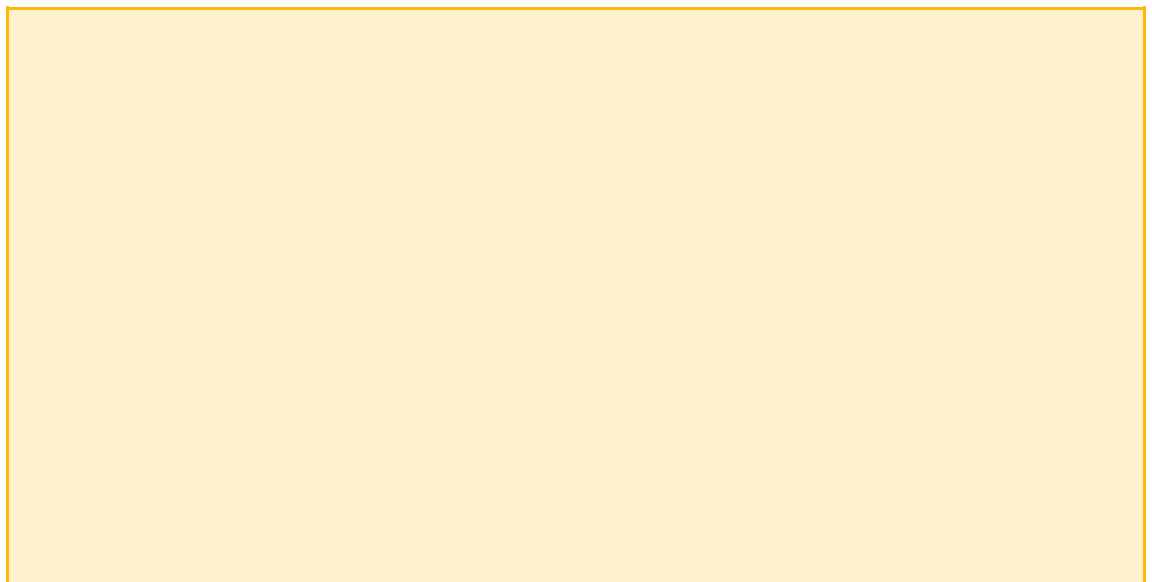
- ECONOMIC DEVELOPMENT
- CULTURAL DEVELOPMENT
- COMMUNITY DEVELOPMENT
- EDUCATION
- HEALTH

**PART B: PROJECT ELIGIBILITY** (Page 2 of 3)

PLEASE USE THE SPACE BELOW TO BRIEFLY DESCRIBE YOUR PROJECT:



PLEASE USE THE SPACE BELOW TO BRIEFLY DESCRIBE HOW YOUR PROJECT WILL BENEFIT THE COMMUNITY AS A WHOLE:



**PART B: PROJECT ELIGIBILITY** (Page 3 of 3)

PLEASE IDENTIFY *PROPOSED / ESTIMATED COSTS* FOR YOUR PROJECT (ACTUAL QUOTES WILL BE REQUIRED WITH THE APPLICATION):

SUPPLIES / EQUIPMENT / SERVICES	PROPOSED COST
<b>TOTAL PROPOSED COST OF PROJECT \$</b>	

PLEASE IDENTIFY OTHER FUNDING SOURCES YOU HAVE APPROACHED AND / OR EXHAUSTED FOR THIS PROJECT:

FUNDING SOURCE	AMOUNT REQUESTED
<b>TOTAL AMOUNT REQUESTED FROM OTHER SOURCES \$</b>	

AMOUNT REQUESTED FROM THE GAMING REVENUE FUND:

\$

WHERE / HOW WILL YOU CONTRIBUTE YOUR 5% EQUITY FOR THIS PROJECT?



## PART C: CERTIFICATION AND AUTHORIZATION

- I certify that the information in this Statement of Intent is correct, to the best of my knowledge;
- I understand the purpose of the Statement of Intent 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 Statement of Intent 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	
Approval to Proceed with GRF Application Form	
Date Applicant Notified of Results	