Appendix "H" to Item 19 of GIC Report 15-014 – Part 12 Page 1 of 4





# **COMMUNITY SERVICES PROGRAM**

## **2016 TRANSFER STATION APPLICATION**

**Revised: June 2015** 

### Applications to be received by: 4:00 p.m. on November 2, 2015

#### SUBMIT THE ORIGINAL (SINGLE-SIDED) to:

#### Rosanna Melatti City Enrichment Fund

71 Main Street West, City Hall, 1st Floor, Hamilton ON, L8P 4Y5 P: 905.546.2424 ext. 4524 E: <u>Rosanna.Melatti@hamilton.ca</u>

Late Applications will not be considered and will be returned unopened

## ATTACHMENT CHECKLIST: ☑

- Completed and signed application
- □ List of the current Board of Directors, including number of years on the Board and Board role (Chair, Secretary etc.)
- □ Most recent financial statements (see note below)
- □ Deficit reduction plan (if required)
- □ Support material that will help the assessors to evaluate your application (eg program brochure, catalogue, fundraising materials)

### **Submission Requirements**

- Do not send any portion of your application, or support material, electronically via e-mail, fax or other electronic means
- Use a typeface no smaller than 12 point
- Follow page length maximums and word maximums if specified on the application. Additional pages will be removed and not assessed
- Incomplete applications will be considered ineligible

#### PLEASE DO NOT INCLUDE THE COVER PAGE AND SUBMISSION INSTRUCTIONS WITH YOUR APPLICATION

Organization Name							
<b>Organization Legal Name</b> (if different from <i>Organization Name</i> above)							
		If the application is successful, make the cheque payable to the <b>legal name</b> instead of the organization name.					
2016 Transfer Fee Request:							
Contact for this application:		Name:	Position:	Phone #:			
Organization Contact							
Phone Number			Email				
Fax Number			Website				
Head Office Address							
Suite / Apt. / Floor							
Number and Street Name							
City	Hamilto	n					
Province	ON	Postal Code					
Mailing Address (if different from the address above)							
Suite / Apt. / Floor							
Number and Street Name							
Town / City							
Province	ON	Postal Code					
Is your agency registered as a non-profit organization?			Yes: 🛛	No: 🗖			
Incorporation No.							
How do the items collected by your organization contribute to your overall programming? You may attach additional material if required.							

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Did your organization receive assistanc If no, please complete the following tab	• •	ng fees in 2015? Yes: 🖬 No: 🗖
Total Tonnage Taken To Transfer Station In 2015*	OR	Total \$ Spent On Tonnage In 2015*

\*We realize that due to the timing of the application the information you provide will not be annualized. Please indicate that date up to which, you have been able to provide this information

#### 2016 City Enrichment Fund Tipping Fee Policy:

The current 2016 Tipping Fee Policy provides within the City Enrichment Fund provides the following level of assistance:

- First 100 tonnes (or Last full years volume whichever is lower) is free.
- Tonnage between 100 and 500 Tonnes @ 50% of 2015 gate rate
- Tonnage over 500 @ full 2015 gate rate

## DECLARATION: On behalf of and with the authority of the organization named above, in signing this application we certify that:

- □ We understand and accept the conditions of 2016 Tipping Fee Policy for the City of Hamilton.
- □ All the information provided is accurate and complete and we are authorized to make an application on behalf of this organization.
- Our organization is not-for-profit. Our donations are not sold for profit or for investment in research.

□ We understand that approved tipping fee amount may be less than the maximum or requested amount.

□ We understand that should we decide not to apply for tipping fee assistance in any year, we lose our preferential tipping fee rate at City of Hamilton transfer stations and will pay the full current year gate rate

Municipal Freedom of Information and Protection of Privacy Personal information on this

application form is collected under the authority of section 107 of the Municipal Act, 2001 S.O. 2001, C. 25. The City of Hamilton will use this information in the determination of eligibility and in establishing funding allocation recommendations. A list of successful applicants will be made public. Questions regarding the collection of this information may be addressed to:

Rosanna Melatti, Community Enrichment Fund

- 71 Main Street West, City Hall, 1st Floor, Hamilton ON, L8P 4Y5
- P: 905.546.2424 ext. 4524
- E: <u>Rosanna.Melatti@hamilton.ca</u>

CERTIFICATION BY THE BOARD OF DIRECTORS						
Agency:						
Signed:						
Print Name:						
Title:						
Date:	4	F				