

APPLICATION

2020/2021 - 2021/2022 Reduce Impaired Driving Everywhere (RIDE) Grant

PLEASE COMPLETE THE APPLICATION (ALL GREY FIELDS BELOW) AND SUBMIT BY E-MAIL
(completed Excel Application and Scanned Signed PDF) TO THE ATTENTION OF:

Yoko Iwasaki, Community Safety Analyst
Program Development Section, Public Safety Division, Ministry of the Solicitor General
25 Grosvenor Street, 12th Floor, Toronto ON M7A 2H3
Tel: (416) 314-3085, E-mail: yoko.iwasaki@ontario.ca

SECTION A: POLICE SERVICE INFORMATION

SELECT POLICE SERVICE NAME
FROM DROP DOWN MENU:

POLICE SERVICE CONTACT INFORMATION: (PRIMARY CONTACT FOR THE RIDE GRANT)

Salutation:		Title:	
First Name:		Last Name:	
Address:			
		Postal Code:	
Tel #:	Ext.:	Fax #:	E-mail:

CHIEF OF POLICE/DETACHMENT COMMANDER CONTACT INFORMATION:

Salutation:		Title:	
First Name:		Last Name:	
Address:			
City:		Postal Code:	
Tel #:	Ext.:	Fax #:	E-mail:

SECTION B: GRANTEE INFORMATION (POLICE SERVICE BOARD/COMMISSION OR BAND COUNCIL):

NAME OF POLICE SERVICE BOARD/
COMMISSION OR BAND COUNCIL:

Salutation:		Title:	
First Name:		Last Name:	
Address:			
City:		Postal Code:	
Tel #:	Ext.:	Fax #:	E-mail:

SECTION C: POLICE SERVICE PROFILE

1. Please outline the geographic description of the area served by your Police Service (please reference townships, urban areas, etc.):

Geographic Area (i.e. size):

Townships/Municipalities included:

2. Describe any special circumstances (i.e., seasonal events, festivals, other, etc.) that affect the area served by your Police Service:

3. Is this a new RIDE Grant application for this area
(No previous funding received)? (Yes/No)

4. Has this area been affected by an
amalgamation since April 2019? (Yes/No)

4. a) If Yes, please list the Police Services/Municipalities affected by amalgamation since April 2019:

4. b) Date of Amalgamation:

5. Are additional resources dedicated by your Police Service to other regular
RIDE activities (i.e. outside those funded by the RIDE Grant)? (Yes/No)

6. If Yes, is there a written contractual
agreement with the municipality? (Yes/No)

7. Number of Sworn Officers:

Municipal/FN Police Service - Identify the # assigned to your Police Service.
OPP - Identify the # of full-time equivalents (FTEs) per contract/location.

8. Population Served
by your police
service (i.e., 100,000):

SECTION D: PROPOSAL INFORMATION FOR R.I.D.E GRANT PROGRAM ONLY (2020/2021 - 2021/2022)

REGULAR RIDE ACTIVITIES MUST NOT BE REFLECTED ON THIS APPLICATION. INCLUDE ONLY OVERTIME OR PAID DUTY ASSIGNMENT COSTS FROM: APRIL 1, 2020, TO MARCH 17, 2021. ALL BOXES MUST BE COMPLETED. ENTER 0 FOR THE MONTHS WHERE RIDE IS NOT PROPOSED.

Month	Shifts (Estimate the # of RIDE shifts that will be conducted in the identified month)	Total Cost
<i>April 2020</i>		
<i>May 2020</i>		
<i>June 2020</i>		
<i>July 2020</i>		
<i>August 2020</i>		
<i>September 2020</i>		
<i>October 2020</i>		
<i>November 2020</i>		
<i>December 2020</i>		
<i>January 2021</i>		
<i>February 2021</i>		
<i>March 2021</i>		
<i>TOTAL</i>	0.00	\$0.00

REGULAR RIDE ACTIVITIES MUST NOT BE REFLECTED ON THIS APPLICATION. INCLUDE ONLY OVERTIME OR PAID DUTY ASSIGNMENT COSTS FROM: APRIL 1, 2021, TO MARCH 17, 2022. ALL BOXES MUST BE COMPLETED. ENTER 0 FOR THE MONTHS WHERE RIDE IS NOT PROPOSED.

Month	Shifts (Estimate the # of RIDE shifts that will be conducted in the identified month)	Total Cost
<i>April 2021</i>		
<i>May 2021</i>		
<i>June 2021</i>		
<i>July 2021</i>		
<i>August 2021</i>		
<i>September 2021</i>		
<i>October 2021</i>		
<i>November 2021</i>		
<i>December 2021</i>		
<i>January 2022</i>		
<i>February 2022</i>		
<i>March 2022</i>		
<i>TOTAL</i>	0.00	\$0.00

SECTION E: SIGNATURE OF AUTHORIZED OFFICIAL

MUST BE SIGNED BY AN AUTHORIZED SIGNATORY FOR THE GRANTEE (Police Service Board/Commission or Band Council)

I certify that the information provided to the Ministry of the Solicitor General is true and correct. I understand that grant funding is dependant upon the Ministry receiving the necessary appropriation from the Ontario Legislature and is subject to funding availability.

Print Name of Authorized Official	Title/Position (Authorized Signing Official)
Signature of Authorized Official	Dated
Print Name of Grantee (Police Service Board/Commission or Band Council)	