



*This form is to be used when applying to the **Canadian Northern Economic Development Agency's (CanNor) Strategic Investments In Northern Economic Development (SINED) Program.***

## SECTION 1 GENERAL APPLICANT INFORMATION

Legal Name of Applicant:	
Project Title:	
Box/Street:	City:
Territory:	Postal Code:
Name of Contact Person in your organization who is responsible for this project:	
Contact Telephone Number:	Contact Fax Number:
Contact E-mail:	
Language preference:	<input type="checkbox"/> English <input type="checkbox"/> French
Applicant Type:	<input type="checkbox"/> Enterprise <input type="checkbox"/> Other non-federal entity, public or private <input type="checkbox"/> Other level of government <input type="checkbox"/> Organization/Association <input type="checkbox"/> Other (Specify):
Organization Status:	<input type="checkbox"/> New <input type="checkbox"/> Existing
	<input type="checkbox"/> For-Profit <input type="checkbox"/> Not-for-Profit
	<input type="checkbox"/> Aboriginal <input type="checkbox"/> Non-Aboriginal
Business Number (Canada Revenue Agency) e.g., 123456789 RT0001	
Incorporation No. (as per territorial or provincial registry)	
Date of Incorporation:	YYYY/MM/DD
In good standing with Provincial/Territorial Legal Registries Please attach Certificate of Good Standing	<input type="checkbox"/> Yes <input type="checkbox"/> No
Applicant Year End	YYYY/MM/DD
Funding Requested from CanNor	\$
Total Projects Costs	\$

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### SECTION 2 DETAILED APPLICANT INFORMATION

<b>Description of the Applicant:</b>			
<b>Corporate/Administrative Information</b>			
<b>Name(s) and Positions(s) of Principal Officers and/or Board of Directors:</b>			
1. (attach list if more than 4 principle officers)			
<b>Major Shareholders:</b> Name, Address, and Telephone Number (if applicable)			
1. (attach list if more than 4 major shareholders)			
<b>Has the applicant received previous CanNor funding?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list the project name(s) and fiscal year:			

### SECTION 3 PROJECT PROPOSAL AND BUDGET

<b>Project Title:</b>			
Proposed start date	YYYY/MM/DD	Proposed end date	YYYY/MM/DD
<b>Project Description</b>			
<b>Project Objectives and Expected Results/Benefits</b>			
<b>Objectives:</b>			
<b>Expected Results:</b>			
<b>Benefits:</b>			

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Project Work Plan		
Activity and Description	Completion Date	Main Output(s)
1.		
2.		
3.		

Project Management
Regulatory/Environmental Considerations

Project Financing	
<p>Provide a detailed project budget which:</p> <ul style="list-style-type: none"> <li>identifies and substantiates detailed project costs by category (e.g., Professional Fees, Salaries, Capital, Travel or others as required.); and</li> <li>substantiate all uses of the funds (e.g., quotations for contracts, costing methodology, estimates person days and per diems for services, estimates of travel requirements and costs). Provide key supporting documents with the application.</li> </ul> <p>In the table: list categories of costs and identify total amount required for project completion regardless of source of funds. Additional detail can be provided as supporting documents.</p>	
Cost Categories	Total
	\$
	\$
	\$
	\$
	\$
<b>Total Costs:</b>	\$
Sources of Funds	

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<b>Sources</b> <i>For projects that span more than one fiscal year –attach a “Sources of Funds” Table by year (April 1 – March 31).</i>	<b>Total Funds required over life of project</b>	<b>Terms and Conditions of Funds</b> <i>Describe terms and conditions of the funding, and provide contact information for funds expected from other sources</i>
Applicant Contribution		
CanNor Contribution		
Other Federal Funding (Specify)		
Territorial Government Funding		
Other (Specify).		
<b>Sources Total:</b>	<b>\$</b>	
<b>Description of Sources of Funds:</b>		
<p><b>Has the Applicant applied to another program/organization for the same project funding being requested from CanNor in this application?</b></p> <p><b>If yes, CanNor may ask for copies of other funding applications or proposals.</b></p>		
<input type="checkbox"/> Yes <input type="checkbox"/> No		
<b>Other Significant Information</b>		

**SECTION 4 OTHER SUPPORTING DOCUMENTATION**

Supporting Documents			
<b>List documents provided as supporting documents to this application</b>			
Certificate of Legal Registry	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Documentation of Aboriginal Ancestry	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Copy of partnership agreements or incorporation documents	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Previous CanNor funding	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Substantiation of Project Costs and Financing (vendor quotes)	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Letters of Support	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Resumes of key personnel	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Copies of other funding applications	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Other (Please List) 1.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Other 2.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Other 3.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Other 4.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
<b>For Profit Businesses:</b>			
Business Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Marketing Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Copy of partnership agreements or incorporation documents	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Previous two year and current year financial statements	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A
Three year Proforma financial statements	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A

**SECTION 5 DECLARATION – AMOUNTS OWING IN DEFAULT TO THE GOVERNMENT OF CANADA**

<p>The information you provide below is collected in accordance with Treasury Board Policy on Transfer Payments (pursuant to sections 7 of the Financial Administration Act).</p> <p>Do you, the Applicant, owe any amounts to the Government of Canada or its Agencies under legislation or contribution agreements.</p>	
<input type="checkbox"/> Yes	<input type="checkbox"/> No

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Amounts owing in default	Nature of amount owing in default (taxes, penalties, overpayments)	Name of government department or agency to which the amount in default is owed

### SECTION 6 SIGNATURE AND AUTHORIZATION

This section is to be completed by a representative of the applicant duly authorized to make this declaration in submission of a funding application to the Canadian Northern Economic Development Agency.

Signature and Authorization	
<p>I certify that:</p> <ul style="list-style-type: none"><li>the information in this application and the supporting documentation is true and complete, and I/we will provide any further information that may be required for CanNor to make a decision;</li><li>the applicant is in principle prepared to enter into a funding agreement with CanNor and to accept the terms, conditions and other obligations of the funding agreement, subject to negotiation;</li><li>any former public servant or holder of public office who is or will be employed or retained for the project, is or will be in compliance with the post-employment provisions of the relevant Conflict of Interest and Post-Employment Codes;</li><li>appointed representatives of the Minister are authorized to obtain from, and share with, other government sources or organizations, public or private, any information necessary to complete the assessment of the project outlined;</li><li>I/we provide consent for CanNor to make sufficient credit and other enquiries that may be necessary in the evaluation of this request; and</li><li>I/we am/are authorized to sign this application on behalf of the applicant.</li></ul>	
Signature	
Name	
Position/Title	
Date Submitted	