

## CRD GRANT PROPOSAL REVIEW

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SECTION 1: APPLICANT AND GRANT INFORMATION			
CRD DEPT. Executive Services	SERVICE NAME: CONTACT YOUR FINANCIAL ADVISOR TO ENGAGE THEM IN YOUR PROPOSAL Salt Spring Island Park Land and Recreation Programs		SERVICE NO.: 1.459
WHAT SERVICE TYPE COULD BENEFIT? Regional	WHICH ELECTORAL AREA? SSI	IF THE PROJECT IS IN AN ELECTORAL AREA, LIST THE COMMUNITY(IES) THAT WILL BENEFIT. Salt Spring Island	
GRANT PROGRAM NAME Investing in Canada Infrastructure Program			APPLICATION DUE (MM/DD/YYYY) 10/01/2020
PROPOSED PROJECT TITLE Fernwood Elementary School Athletic Field Upgrades		PROJECT TYPE Infrastructure Assets - New or Renew	
DESCRIBE THE OUTCOME OF THE PROJECT: The development of playing fields on Salt Spring Island will improve access to quality recreational and community spaces. The lack of available playing fields results in youth having to travel off island or no longer participate in the sport. This project is eligible for funding by being community-oriented, non-commercial and open for use to the public. The five year SSI PARC Capital Reserve Fund has this project scheduled for 2022 and includes \$300,000 of matching funds.			
SECTION 2: ALIGNMENT AND IMPACT – Is it a Good Fit for the CRD?			
Grants can provide timely additional resources to advance organizational goals. The pursuit of a grant opportunity must, however, be carefully reviewed to check for potential impacts that can have unexpected and unintended consequences. Some grants are straightforward; others are more complex. The questions below help sort everything out for well-informed action.			
ALIGNMENT WITH A CRD BOARD PRIORITY? Choices	ALIGNMENT WITH A CORPORATE PRIORITY? Choices	ALIGNMENT WITH THE REGIONAL GROWTH STRATEGY? Choices	
ALIGNMENT WITH THE SERVICE PLAN? Yes - for year 2	ALIGNMENT WITH THE CAPITAL PLAN? Yes-for year 2	ALIGNMENT WITH THE ASSET MANAGEMENT PLAN? Choices	
IF THE PROJECT ALIGNS WITH A DEPARTMENTAL / DIVISIONAL STRATEGIC PLAN, PLEASE SPECIFY WHICH ONE: 2019 Salt Spring Island Parks and Recreation Strategic Plan			
THE TIME-RELATED QUESTIONS BELOW ARE SEEKING APPROXIMATIONS. FOR AN EXPLANATION OF CONTEXT/METHODOLOGY, CLICK <a href="#">HERE</a> .			
HOW MANY HOURS, <u>APPROXIMATELY</u> , WILL PREPARING THE GRANT APPLICATION TAKE? <input checked="" type="checkbox"/> 1-10 <input type="checkbox"/> 11-30 <input type="checkbox"/> 31-50 <input type="checkbox"/> 51-70 <input type="checkbox"/> 71-90 <input type="checkbox"/> 91-110 <input type="checkbox"/> 111-130 <input type="checkbox"/> 131-170 <input type="checkbox"/> 171+		HOW MANY HOURS, <u>APPROXIMATELY</u> , WILL GRANT ADMINISTRATION TAKE IF AWARDED? <input checked="" type="checkbox"/> 1-10 <input type="checkbox"/> 11-30 <input type="checkbox"/> 31-50 <input checked="" type="checkbox"/> 51-70 <input type="checkbox"/> 71-90 <input type="checkbox"/> 91-110 <input type="checkbox"/> 111-130 <input type="checkbox"/> 131-170 <input type="checkbox"/> 171+	
GRANT REQUEST: \$585,500	CRD COSTS: ELIGIBLE AND INELIGIBLE \$250,000	TOTAL PROJECT COST (EST.) \$835,500	MAIN SOURCE OF CRD FUNDING SHARE Capital Reserve Fund
WHAT IMPACT WILL THE APPLICATION EFFORT HAVE ON THE YOUR SERVICE'S WORKPLAN? 1-Low: Applying is not disruptive to the Service's workplan		EVIDENCE OF SECURED FUNDS Yes-funding evidence is available now	
WHAT IMPACT WOULD RECEIVING THIS GRANT HAVE ON YOUR SERVICE'S WORKPLAN? 1-Low: This grant is not disruptive to the Service's workplan			
IF APPLYING FOR THE GRANT HAS AN IMPACT RATING OF 2 OR 3, IDENTIFY YOUR SERVICE'S WORKPLAN ADJUSTMENTS NEEDED TO ACCOMMODATE THE GRANT APPLICATION EFFORT.			
IF BEING AWARDED THE GRANT HAS AN IMPACT RATING OF 2 OR 3, IDENTIFY YOUR SERVICE'S WORKPLAN ADJUSTMENTS NEEDED TO ACCOMMODATE PROJECT IMPLEMENTATION.			
WHAT TYPE OF OBLIGATIONS WOULD GETTING THE GRANT IMPOSE ON THE CRD:		1. TYPICAL-Executing/amending agreement, claims, project reports	
IF THE CRD OBLIGATIONS ARE TYPE 2, DESCRIBE ADJUSTMENTS TO THE SERVICE'S WORKPLAN OR ANY OTHER MEASURES NEEDED TO ACCOMMODATE THESE OBLIGATIONS.			
WHAT SPOILOVER BENEFITS, ABOVE AND BEYOND THE GRANT PROGRAM OBJECTIVES, COULD RESULT FROM THIS GRANT EFFORT? SEE INTANGIBLE BENEFIT EXPLANATION <a href="#">HERE</a> .			
<input type="checkbox"/> INNOVATION	<input type="checkbox"/> PARTNERSHIP/COLLABORATION	<input checked="" type="checkbox"/> SUPPORT OF RURAL COMMUNITIES	<input type="checkbox"/> MITIGATION OF A SEVERE RISK

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<b>SECTION 3: ASSET MANAGEMENT REVIEW:</b> For projects that relate to new or renewed assets This section is oriented to infrastructure assets and may not apply to a project relating to natural assets. To respond, type or choose 'Not applicable' as needed. Space is provided below for commentary related to natural assets and eco-system services.		
FOR WHAT YEAR IS THE ASSET IN THE CAPITAL PLAN? <b>2022</b>	DOES THE ASSET HAVE AN ASSET MANAGEMENT PLAN? <b>Not yet; an AMP is being developed</b>	WHAT IS THE ASSET'S REMAINING SERVICE LIFE? <b>New asset - not applicable</b>
WHAT IS THE ASSET'S CONDITION RATING? <b>Not Applicable</b>		WHAT IS RISK OF ASSET FAILURE? <b>Not Applicable</b>
USE THIS SPACE, IF REQUIRED, TO ELABORATE ON ASSET MANAGEMENT CONSIDERATIONS YOU THINK NEED TO BE HIGHLIGHTED (E.G.: COMMENTS RELATING TO NATURAL ASSETS)		
<b>SECTION 4: THINK LIKE A FUNDER:</b> What makes the project a great fit for the grant program?  DESCRIBE FEATURES OF THE PROPOSED PROJECT THAT MAKE IT A GREAT FIT TO ACHIEVE THE GRANT PROGRAM'S OBJECTIVES AND EVALUATION CRITERIA.  <b>As noted on page 1, development of this new recreational facility is critical to community health and well-being by keeping SSI youth engaged in recreational activity. The need for youth to travel off-island for participation sports introduces a kind of risk that is not covered in the asset consequences covered in the chart above.</b>		
<b>SECTION 5: ATTESTATION AND APPROVALS</b>  In this section, the Project Lead attests to the accuracy of the information submitted in this form and forwards it for review and approval according to Departmental practices. The form makes room to customize approval processes to suit Divisional / Departmental needs. Completed forms are sent to the CRD Corporate Asset and Grant Management Analyst.		
<b>PROJECT LEAD ATTESTATION</b>		
<input checked="" type="checkbox"/> I CERTIFY THAT THIS PROPOSAL PROVIDES A TRUTHFUL AND ACCURATE REPRESENTATION OF THE PROJECT; <input checked="" type="checkbox"/> I HAVE REVIEWED THE GRANT PROGRAM GUIDE CAREFULLY AND ATTEST THAT AN APPLICATION FOR THIS PROJECT CAN MEET ALL THE GRANT PROGRAM REQUIREMENTS; <input checked="" type="checkbox"/> I ATTEST THAT THE SERVICE CAN AMEND ITS WORKPLAN TO ALLOCATE THE RESOURCES NEEDED FOR OUTCOME ACHIEVEMENT WITHIN THE PROGRAM TIMELINE; <input checked="" type="checkbox"/> I HAVE IDENTIFIED, IN CONSULTATION WITH MY MANAGER, ALL IMPACTS / OBLIGATIONS ENABLING SENIOR MANAGEMENT'S INFORMED CONSIDERATION OF THIS PROPOSAL.		
NAME	TITLE	DATE (MM/DD/YYYY)
<b>MANAGER AUTHORIZATION TO PROCEED WITH THE PROPOSED PROJECT</b>		
NAME	TITLE	DATE (MM/DD/YYYY)
<b>Dan Ovington</b>	<b>Manager, Salt Spring Parks and Recreation</b>	<b>08/04/2020</b>
<b>SENIOR MANAGER AUTHORIZATION TO PROCEED WITH THE PROPOSED PROJECT</b>		
NAME	TITLE	DATE (MM/DD/YYYY)
<b>Karla Campbell</b>	<b>Senior Manager Salt Spring Island Electoral Area</b>	<b>08/04/2020</b>
<b>GENERAL MANAGER AUTHORIZATION TO PROCEED WITH THE PROPOSED PROJECT</b>		
NAME	TITLE	DATE (MM/DD/YYYY)
<b>Robert Lapham</b>	<b>Chief Administrative officer</b>	<b>08/04/20</b>
THANK YOU FOR YOUR TIME AND THOUGHTFUL ATTENTION TO THIS ASSESSMENT PROCESS.		
ONCE THE REQUIRED APPROVALS FOR THIS PROPOSAL ARE SECURED, THE PROJECT LEAD SENDS THE APPLICATION TO CRD Corporate Asset and Grant Management Analyst		