

**AT Maintenance and Operations Grant
Interim Disbursement Request
AT Corridor on land owned/ partially owned by HRM**

Please submit this report by email to HRM Offices if final grant disbursement is needed before March 1, 2024 (due to a cash deficit for projects), and 30 days before funds are required:

Emma Martin, AT Community Programs Coordinator; Email: ATGrants@halifax.ca

Submission date:

AT Maintenance and Operations Grant Awarded on (month, year):

Organization Identification

1. Group: Name, Mailing Address, Email, Phone, Fax, Website

2. Reporting for the Grant Recipient: Name, Title in Organization, Phone and Email

3. Project Lead (if different from reporting contact): Name, title in organization, phone, email

Active Transportation Facility

Describe any outstanding project(s) expected to be completed before March 31st: Summary and expected budget

Describe any outstanding project(s) that will not be completed before March 31st: Summary and approximate budget

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Budget Reporting

– fill this out before the Grant Disbursement as reporting totals will be copied automatically on the form.

Please submit supporting documents listed below:

- Contractor (s)’ invoices naming the Recipient that hired the Contractor (s)’ services;
- Copy of all receipts for eligible expenses to which the Contribution Amount was applied;

HRM AT Maintenance and Operations Grant Summary	
HRM Contribution Amount awarded in 2023-2024 as per awarding document (including carry over and up to \$2,000 organizational expenses)	
HRM Contribution paid to date	

OTHER FUNDING SOURCES – only those received for active transportation corridors maintained	
Other Municipal funds (Councilor district funds, other grants)	
Province – CCH- Operational Funding for Abandoned Rails Corridors	
Province – OHV-IF Funding	
TCT Funding	
Corporate funding	
Trail Association’s own funds, including unspent HST	
Other sources of funding- please specify	
TOTAL OTHER FUNDING SOURCES	

ORGANIZATIONAL EXPENSES (Include all, not just those funded from HRM Grant)	
TOTAL ORGANIZATIONAL EXPENSES	
MAINTENANCE EXPENSES (Include all, not just those funded from HRM Grant)	
CONTRACTOR SERVICES- include labour and any supplies purchased by contractors directly and included in their invoices	
SUPPLIES/ MATERIALS/ EQUIPMENT Purchased by recipient directly and not included in the contractors’ invoices	
TOTAL MAINTENANCE EXPENSES	
TOTAL OVERALL EXPENSES	

Grant Disbursement Request

\$HRM Award = HRM Contribution Amount awarded in 2023-2024	
\$Total Other Funding Sources = Amount received from all other funders, including own organization's contribution	
\$Organizational Expenses = Total Organizational expenses reported	
\$Organizational expenses above \$2,000 to be paid with other sources of funding (e.g. CCTH, HRM- RT Grants, own funds)- include the amount to your right	
\$HRM's contribution towards organizational expenses (up to \$2,000) = \$Organizational Expenses - \$ Organizational expenses paid with other sources of funding	
\$Total Maintenance Expenses = Total maintenance expenses reported	
\$HRM's Contribution paid to date = Contribution amount paid by HRM to date (\$0 if no payment was received), include carry-over, if any was recorded in the awarding	
HRM's Contribution Amount Available = \$Award - \$ HRM's Contribution paid to date	
<p>\$Balance from HRM contribution award= \$HRM's Contribution paid to date + \$Total Other Funding Sources - Total Maintenance Expenses - \$HRM's contribution towards organizational expenses (up to \$2,000)- calculate this in the right column</p> <ul style="list-style-type: none"> • Positive result: no more payments, unless Final Report Disbursement shows a deficit • Negative result:the difference will be paid out up to HRM's Contribution Amount Available 	
HRM's payment = \$Balance from HRM contribution award (if amount above is negative) up to HRM's Contribution Amount Available - include in the right column the smaller of the deficit above or the HRM amount available	

Submitted by:

Print name and title:

Signature:

Organization Identification: Group: Name, Mailing Address, Email, Phone, Fax, Website