Small Capital Grant Application Form

General Information

Purpose: To support minor capital projects, such as facility improvements & upgrades, or the construction of a small new project.

Eligibility: Non-profit organizations may apply only once per year. Applicants cannot apply for the large capital project in the same year.

Amount: For projects with a total value of $20,000 or less. Applicants can apply for up to 50% of the project's capital costs, up to $10,000.

Deadline: March 31st, 2026.

Applicant Information

Organization's full name?	
Contact Person:	**Position:**
Full Mailing Address:	**Phone:** **E-mail Address:**
Brief description of the organization's activities and mandate: *(Attach printed materials if available)*	
Description of proposed capital project: *(Attach separate sheet if necessary)*	

Please contact Peter McCracken at grants@cumberlandcounty.ns.ca or 902-397-3431 if you have any questions.

Financial Information

Total anticipated capital costs of this project? $ _____

Amount of assistance requested from the Municipality: $_____
(up to 50% of annual operating costs, to a max of $10,000)

Financial contribution made by your organization towards this project:

Cash: $_____ In Kind: $_____ Total (cash plus in-kind) $_____

Has the Municipality provided financial assistance to this facility in the past? Yes ☐ No ☐

If yes, list the most recent year and amount _____

If your organization received funds from the Municipality in the previous fiscal year, you must complete the Final Project Report Form before this year's application can be considered. The form can be found here: https://cumberlandcounty.ns.ca/grants-to-organizations.html

CHECKLIST:

The following checklist should be completed by the applicant and submitted with the application.

Please attach the following:

☐ Most recent annual financial report for the organization

☐ Copy of Deed or Lease for the property

☐ If applicable, Final Project Report Form(s) for 2025 funded projects (if not already submitted)

Signature: _____ **Date:** _____

Please contact Peter McCracken at grants@cumberlandcounty.ns.ca or 902-397-3431 if you have any questions.

For Office Use Only:

Date application was received: _____

Was the application received on time?	Yes ☐	No ☐
Was the application complete?	Yes ☐	No ☐
Has the applicant demonstrated financial need?	Yes ☐	No ☐
Has the applicant reported on previous grants from the Municipality?	Yes ☐	No ☐

Please contact Peter McCracken at grants@cumberlandcounty.ns.ca or 902-397-3431 if you have any questions.