

APPLICANT INFORMATION	
Legal Name of Applicant	
Business Name (if different from above)	
Mailing Address (complete)	
Courier Address (if different from above)	
Physical Address of Project (Include Collection Site Name)	
How did you find out about the Used Oil Materials Support Grant?	

CONTACT INFORMATION	
Contact Name & Title/Position	
Telephone Number	
Fax Number	
E-mail Address	
Alternate Contact Name	
Telephone Number	
E-mail Address	

PROJECT PLAN

Clear Site Plan (to be attached to application) must include:

- ☐ Dimensions of proposed project
- ☐ 3 quotes for each proposed infrastructure

Estimated volume of oil collected at the potential project site (monthly or annually)

Please explain why the grant would benefit this site.

DETAILED PROJECT BUDGET (ITEMS TO BE INCLUDED IN BUDGET)

ELIGIBLE EXPENSES

****NOTE: The quotes provided by the Applicant below are provided solely for the purposes of this Funding Application. Funding will be based on actual expenses incurred (as evidenced by receipts/invoices provided to ARMA) up to the maximum funding approved by ARMA under the Funding Program.****

	Description	Amount (\$)
Please itemize each cost for work to be completed (excluding GST) (Attach 3 quotes to the application)		
Total Funding amount requested from ARMA		

REVIEW

Please review your Funding Application to ensure that you have completed all fields as incomplete Funding Applications will not be accepted. Check that you have included:

- ☐ Clear Site Plan of proposed project
- ☐ 3 Quotes from suppliers and/or contractors for all items for which funding is requested
- ☐ Proposed construction schedule
- ☐ Other (please specify) _____

AUTHORIZING SIGNATURE

- a) Please note the Funding Application must be signed by a person with legal and/or financial signing authority within your municipality/organization.
- b) All Applicants agree to comply with all laws, bylaws, regulations, and requirements of any Federal, Provincial or Municipal authority. ARMA accepts no legal liability for the Applicant's project.

With this signature I agree that I have read and understand the funding conditions, and I understand that all conditions need to be adhered to if my application is successful.

Print Name & Title

Signature

Please submit either an electronic or hard copy of the completed application by

E-mail:

collection.sites@albertarecycling.ca

Mail:

Alberta Recycling Management Authority
P.O. Box 189
Edmonton, AB T5J 2J1

Courier:

Alberta Recycling Management Authority
10020 108 Street
Edmonton, AB T5J 1K6