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| Please be advised location of mural needs to be pre-approved by [mural@ottawa.ca](mailto:mural@ottawa.ca) by **March 25**, 2020 prior to the application being submitted. **Application deadline: March 31, 2020**  **LEAD ORGANIZATION INFORMATION** | | | | | |
| **Lead Organization Name:** |  | | | | |
| Please check all that apply.  The Lead Organization is a…   * Insured and incorporated body; * non-profit organization with expertise in working with youth; * artist or arts organization with expertise in creating murals; * property owner or representative of proposed location of the mural * recipient of funds in 2019 (preference will be given to those who did not get funding in 2019) | | | | | |
| Organization’s Start Date *(yyyy / mmm / dd)* | | |  | | |
| Incorporation Name: | | |  | | |
| Incorporation Number | | |  | | |
| Organization Website: | |  | | | |
|  | | **Primary Contact** | | | **Alternate Contact** |
| Name | |  | | |  |
| Title | |  | | |  |
| Email Address | |  | | |  |
| Phone Number | |  | | |  |
| Mailing Address: | |  | | | |
| Organization’s Total Revenue (2019): $ | | | |  | |
| *Please enclose a copy of your agencies’ most recent audited financial statement or a signed statement if you do not have an audit.* | | | | | |
| Organization’s Mandate or Mission:  *(200 words maximum, you may submit attachments such as brochures.)* | | | | | |

**Important note:** Partner organizations must provide a letter of support to confirm their involvement in the project or sign the last page of this application.

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| **SECONDARY PARTNER INFORMATION** | | | | | | | |
| *Secondary Partner One* | | | | *secondary Partner Two (If Applicable)* | | | |
| **Organization Name (**if applicable)**:** | | | | **Organization Name:** | | | |
| Name: | | | | Name: | | | |
| Role in Organization (Title): | | | | Role in Organization (Title) | | | |
| Address: | | | | Address: | | | |
| City: | Province: | | Postal Code: | City: | Province: | | Postal Code: |
| Phone Number: | | Fax Number: | | Phone Number: | | Fax Number: | |
| E-mail Address: | | | | E-mail Address: | | | |
| Role in Project….  1. non-profit organization with expertise in working with youth; 2. artist or arts organization with expertise in creating murals; 3. Property owner or representative of proposed location of the mural. | | | | Role in Project…  1. non-profit organization with expertise in working with youth; 2. artist or arts organization with expertise in creating murals; 3. Property owner or representative of proposed location of the mural. | | | |

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| **Proposed Mural Project** | | |
| Project Name |  | |
| Total Funding Requested for this Project: | | $ |
| Project Summary *(maximum 200 words)* | | |
|  | | |
| 1. Please describe your organization’s capacity to fulfill the project requirements. | | |
| 1. Please list the civic address of a mural location, which must have been pre-approved by mural@ottawa.ca by **March 25, 2020**.  Please describe which wall will be painted, especially if it’s not obvious from the civic address. You may include an image through google map to identify the wall. Please also describe how easily visible and accessible the wall is to the general public.   \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_   1. Dimensions of Mural (in feet): L \_\_\_\_\_\_ x W\_\_\_\_\_\_ = \_\_\_\_\_\_\_ sq. ft 2. Cost / sq. ft (Total funding request divided by square footage of mural) = \_\_\_\_\_\_\_\_\_\_\_\_ | | |
| 1. Please provide clear evidence of a graffiti problem in the target area.    1. *(You may submit recent photos, provide a summary of graffiti removal costs over the last year, or your landlord)* | | |
| 1. How does the project address the graffiti problem? | | |
| 1. How does the project contribute to community safety? | | |
| 1. How are the youth (12 years and older) who are involved in the mural project marginalized and/or prone to tagging? Provide details. | | |
| 1. How does this project provide recreation, employment, pre-employment and/or soft-skills training? | | |
| 1. Will a professional mural artist help with the project? The artist can have any level of experience and should provide guidance to the project team.   *If you answered “yes”, please provide the artist’s profile or biography. It should outline their mural experience and their experience working with youth.*  *If you answered “no”, please explain how the mural project will help beautify the neighbourhood. Tell us how your group plans to ensure that your mural will meet a high artistic standard.*  *Please note we will not cover fees for multiply artists.* | | |
| 1. How will you guide the artistic vision of this project? Please note that youth must be involved with the painting of the mural. | | |
| 1. How will you engage and/or consult with the broader community on the mural project? | | |
| 1. Have you applied for funding for this mural project from any other sources? If yes, please specify. | | |

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| **BUDGET** | | | | | | | | | | |
| **Item** | | | **Details** | | | | | **Cost** | | |
| **Salaries** *(e.g. number of youth, employment duration, hours per week, hourly salary)* | | |  | | | | | **$** | | |
| **Honorarium** *(e.g. cost of honorarium)* | | |  | | | | | **~~$~~** | | |
| **Artist Fees (We will only allow fees for 1 main artist)** | | |  | | | | | **$** | | |
| **Equipment, Food,**  **Installation fees**  *(e.g. rental space, panels, cherry picker, scaffolding, power washer)* | | |  | | | | | **$** | | |
|  | | | | | **$** | | |
|  | | | | | **$** | | |
|  | | | | | **$** | | |
| **Supplies**  *(e.g. paint, brushes, tarps, rollers, boards)* | | |  | | | | | **$** | | |
|  | | | | | **$** | | |
|  | | | | | **$** | | |
|  | | | | | **$** | | |
| **In kind contributions** | | | | | | | | **$** | | |
| **Total** | | | | | | | | **$** | | |
|  | | | | | | | | | | |
| **Total Project Costs** | **$** | | **Other Sources of Revenue** | | | **$** | **Grant Requested** | | **$** | |
| Please give any necessary details to explain the costs: | | | | | | | | | | |
| **PROJECT TIMELINE** | | | | | | | | | | |
| **Project Start Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Community Consultation Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Recruitment of Youth Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Program Activity Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Painting Date(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Mural Launch Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **Project End Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**  **(no later than Sept 30, 2020 as per the guidelines.)** | | | | | | | | | | |
| **Declaration:**  I hereby certify that our organization, if successful in securing funding, will organize a recognition event and will report on the project including project report and youth evaluation forms; the grant recipient and property owner acknowledges that they are responsible for all future maintenance of the mural artwork.  I understand and hereby certify that this application and the statements made in it will be considered part of a funding contract;  I also hereby certify that the board of directors or governing body has authorized this proposal, that all information provided in this application and any attachments is true, correct and complete in every respect and that I have signing authority for the organization. | | | | | **REQUIRED DOCUMENTS**   * \* 1. Proof of incorporation and years in existence of primary applicant * \* 2. Latest financial statement of primary applicant (unaudited statements will be accepted). For schools,   we accept the Board’s consolidated financial statement. * \* 3. Proof of insurance for the primary applicant * 4. Letter(s) confirming the participation of your partners * 5. Proof of a problem with graffiti * 6. Budget * 7. Proof of mural location approval   \* Not required for agencies currently in receipt of City of Ottawa funding  The supporting documentation listed in the above box must accompany each application. If submitted electronically, applicants must submit scanned images of the supporting documents before the application deadline. | | | | | |
| **(Note: Signatory must have signing authority for the corporation)** | | | | | | | | | | |
| **Name and title** (please print): | | | | | | | | | | |
| **Date**: | | | | | | | | | | |
| **Partner #1 Signature:**  **Name and Title:**  **Date:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | **Partner #2 Signature:**  **Name and Title:**  **Date:** | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |

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| Completed applications (including supporting documents listed at the bottom of the Application Form) must be postmarked, emailed or received by 4 p.m. **Tuesday, March 31, 2020**  **Delivery / Mail Address:**  **Crime Prevention Ottawa**  110 Laurier Avenue West, 2nd Floor  Ottawa, ON K1P 1J1  **e-mail:** [cpo@ottawa.ca](mailto:cpo@ottawa.ca) | The City of Ottawa is subject to the *Municipal Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, c.M.56, as amended (‘MFIPPA’) with respect to information under its custody and control. Accordingly, all documents provided to the City of Ottawa in this Funding Submission may be available to the public unless the party submitting the information requests in writing that it be treated as confidential. |