

# NACFOR DONATION APPLICATION

## APPLICATION INSTRUCTIONS

- A. Please read NACFOR *Donation Policy* prior to completing this application.
- B. Applications are available:
- online through NACFOR's website: [www.nakuspcommunityforest.com](http://www.nakuspcommunityforest.com)
  - in hardcopy at NACFOR's office: 119 Broadway Street, Nakusp.
- C. Acceptable formats for completed application forms are:
- Download a copy (fill and save)
  - Handwritten (legible) onto printed copy of this form
- D. Required fields: All fields must be completed. If a field is not applicable, please enter N/A.
- E. Donation applications must be signed by an authorized representative.
- F. Submission: One (1) application per project. Submissions are accepted by email, mail and hand delivery.
- G. Attachments and supporting documentation are not to exceed two pages in total. (Project budget must be included with all applications of \$1,000 or more, either within the Project Description or as an attachment).
- H. NACFOR reserves the right to contact other persons or organizations for input into the proposed project.
- I. Inquiries and completed applications – please forward to:
- NACFOR Donation Application**  
Attention: Beth McLeod  
Nakusp and Area Community Forest  
119 Broadway Street  
P.O. Box 925, Nakusp, BC V0G 1R0  
Phone 250-265-3656, email [donations@nakuspcommunityforest.com](mailto:donations@nakuspcommunityforest.com)
- J. Receipt confirmations of e-mailed applications will be provided by return email. For other types of delivery, the proponent is responsible for confirming receipt.

# NACFOR DONATION APPLICATION

## A. ORGANIZATION

Name of Organization responsible for the project

Organization's society/CRA registration

Contact person

Name:

e-Mail:

Position:

Phone:

Fax:

5. Mailing address

Address

City

Postal Code

## B. GENERAL PROJECT INFORMATION

Donation being applied for: \_\_\_ <\$1,000 \_\_\_ \$1,000 to \$5,000 \_\_\_ \$5,000 to \$10,000  
(Budget must be included with all applications of \$1,000 or more, either in Description box below or attached)

Donation of 1 load of Firewood: \_\_\_\_\_ (budget not necessary)

**PROJECT TITLE**

**PROJECT DESCRIPTION** (summary of the proposed activities):

**Anticipated Start Date:** \_\_\_\_\_

**Description** (for those applications of \$1,000 and greater, please include a budget in this section if you have not provided it on a separate page):

Are there attachments to this application? \_\_\_ Yes \_\_\_ No

**LOCATION OF PROJECT OR LOCATION OF ORGANIZATION (refer to the attached map):**

- Inside Village of Nakusp
- Nakusp/Rural Nakusp – includes Summit Lake Ski Hill
- Area K South – Arrow Park to Edgewood

**PROJECT FOCUS:**

- Forestry Based Initiatives
- Economic Development
- Arts and Culture
- Youth (  Sports Team  Sports Club  Youth Club  Youth Organization  Other)
- Number of Youth members: \_\_\_\_\_
- Other \_\_\_\_\_
- Environmental Programs
- Recreation
- Social Programs

**C. DONATION REQUEST** (The Board will determine cash value for in kind goods, services and other)  
**Goods** are tangible items that can be seen and touched such as logs, books and pens. **Services** are provided by other people and include the cost of labour and the equipment used in providing the service.

Request Type					Total (\$)	
<b>CASH - if requesting a cash donation, please enter the amount requested on this line →</b>					<b>\$</b>	
Request Type for non-cash requests	Description (use additional page if necessary)	Unit Type	Est# of Units	These columns to be completed by NACFOR		
				Unit Rate (\$)	Total (\$)	
NACFOR to donate in kind <b>GOODS</b>	eg., logging truckload of firewood					
NACFOR to donate in kind <b>SERVICES</b>						
Other type of donation requested - explain						
<b>TOTAL</b>					<b>\$</b>	

**D. RECOGNITION OF NACFOR'S DONATION**

**If your donation is approved, how will NACFOR's donation be acknowledged?**

\_\_\_\_\_  
Signature of Authorized Representative                      Print Name and Position                      Date

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**E. BOARD APPROVAL     Meeting     eMail     Other**

Date Received: \_\_\_\_\_                      Date reviewed: \_\_\_\_\_

The Donation Application was:

approved:  for the full amount    for \$ \_\_\_\_\_                       not approved

Rationale: \_\_\_\_\_

\_\_\_\_\_



**FUNDING AREAS  
REFERENCE MAP**

SCALE 1:450,000

DATE: 2014/04/14

