## Company Information

Fields are pre-populated with a generic example, please click on the grey text to insert your information.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Registered Business Name:** | | | | | Company ABC Inc. | | | | | |  |  |  |
| **Legal Business Name:** | | | | | 8491946 Inc. | | | | | |  |  |  |
| Business Registration: | | | | Sole Proprietor | | Partnership | | | **Corporation** | | | |  |
| Address: | | 123 Coffee Street | | | | | | | | | ## | |  |
|  | | Street | | | | | | | | | Unit # |  |  |
|  | | North Bay | | | | | Ontario | | | | P1B 7G8 | |  |
|  | | City | | | | | Province | | | | **Postal Code** | |  |
| Triple-P Lead Contact: | | | | John Smith | | | President | | | | john@abc.ca | | |
|  | | | | Name | | | Position | | | | Email | | |
| Secondary Contact: | | | | Amy Doe | | | Lead Engineer | | | | amy@abc.ca | | |
|  | | | | Name | | | Position | | | | Email | | |
| Business Phone: | | | (705) 123-4567 ext. 8910 | | | | | Website: | | example@abc.ca | | | |
| HST #: | 123456789 RC0001 | | | | | | |  | |  | | | |

**Detailed description of company’s history, current products / services and future aspirations:**

Company ABC Inc manufactures equipment for the mining exploration market. Established in 1987, ABC has a current focus on North American mines; both open pit and underground operations. ABC’s patented design allows users to drill faster and more efficiently than with competitive products, providing a unique competitive advantage over our competition. The proprietor has over 30 years of experience in the mining industry and is uniquely positioned to leverage growth into the future. Planned future expansion of the product line into more mobile, lightweight equipment will help to continue to spur growth. Within the next 18 months, ABC hopes to enter into Central and South American markets, with trips planned to Mexico and Brazil respectively.

**If your organization has previously received Triple-P funding, please specify the impact and overall success of the past project. Please be aware that companies are not eligible to reapply for the same project that was previously supported by the program.**

Company ABC previously received Triple-P Funding to assist in purchasing a CNC machine. This enabled ABC to increase the production capacity of our units, thereby leading to increased sales and additional revenue. Since last reporting Triple-P outcomes in the survey, ABC has secured a contract with a South American company to supply their units to them with on-going discussions with a Australian company to do the same. The workforce at ACB has increase 1.5 times as a result.

## Project Information

**Detailed description of the project:**

The proposed project is for the purchase of a 7 axis CNC machine that will allow for in-house modifications to currently outsourced components utilized in the drills. With this purchase, ABC will become much more efficient and cost competitive in the market, allowing for faster turnaround times and the ability to redesign and manufacture new product iterations for continuous improvement; all in-house.

## Project Impact

**What impact will this project have on your business with regards to the following elements; choose all that apply:**

**Productivity  Prototype  Process Improvements**

**Explain in detail what the impact will be:**

The purchase of the 7 axis CNC machine will assist ABC in both the productivity and prototyping aspects of operation. Currently ABC is outsourcing the creation of prototypes and relies on a secondary contractor to machine the drill bits in the final stage of production. A 7 axis CNC would bring this production step in-house allowing for greater quality control, reduced costs and a faster production cycle. Having this machine would also permit the engineers to fast track the prototyping process for new drill bits.

**Describe measurable outcomes and results as well as the benefits to Northern Ontario:**

This project will lead to the creation of 3 jobs, add 4 new skill sets to the workforce, create the possibility of jobs for suppliers nearby and diversify economic activity in Northern Ontario.

**Impact timelines:**

|  |  |  |
| --- | --- | --- |
| **Timeline** | **Gross Sales Revenue** | **Number of Employees** |
| **Current** | $1,000,000 | 6 |
| **Projected in 3 years** | $1,500,000 | 9 |

## Project Costing Details

**PART 1 – FUNDING LEVEL REQUESTED**

**Triple-P funding is available at 1 of 3 levels: $5,000, $7,500 or $10,000. Please select the level for which you are applying and verify that your project meets the minimum project spend required before tax.**

|  |  |  |
| --- | --- | --- |
| **Checkmark the funding level chosen** | **Funding Level** | **Minimum project spend required before taxes**  **(Triple-P will not cover HST for approved projects)** |
|  | **$5,000** | **$10,000** |
|  | **$7,500** | **$15,000** |
|  | **$10,000** | **$20,000** |

**PART 2 – PROPOSED PROJECT COSTS**

**EXAMPLE: Company ABC applies for a $5,000 grant for 2 items:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Description** | 1. **Costs before HST** | | 1. **Amount Funded by Triple-P** | |
| **Drill Press** | **$8,000** | | **$3,000** | |
| **Simulation Software** | **$4,000** | | **$2,000** | |
| **Total Project Cost before HST exceeds minimum project spend of $10,000** | **$12,000** | **Total funding requested matches the $5,000 level for which Company ABC applied.** | | **$5,000** |

**Please insert in the table below:**

1. **Description of all known expenditures from project start to completion**
2. **The cost allocated to each – Please note supporting documents will be required (ex: quotes)**
3. **Identify which amounts are to be funded by Triple-P**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| 1. **Description**   **(Known or anticipated expenditures for the project)** | 1. **Costs**   **(Costs before HST)** | | 1. **Amount funded by Triple-P**   **(Identify the amounts to be funded to a maximum of the funding level selected above)** | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| Description of costs | $$$ | | $$$ | |
| **TOTAL PROJECT COST:**  **(Must meet/exceed the minimum project spend;**  **$10,000 before tax to be eligible for $5,000**  **$15,000 before tax to be eligible for $7,500**  **$20,000 before tax to be eligible for $10,000)** | $$$ | **TOTAL FUNDING REQUESTED:**  **(must match your selected funding level from above: $5,000, $7,500 or $10,000)** | | $$$ |

**Are you applying for / have you utilized other Government funds related to the project?** **Yes**  **No**

**If “Yes”, please state which program and for what amount**

|  |  |
| --- | --- |
| **Program** | **Amount (CAD)** |
| Northern Ontario Heritage Fund | $50,000.00 |
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## Supporting Documents

**NOTE: Applicants are encouraged to utilize Northern Ontario expertise/suppliers where possible.**

**Please submit two contractor quotes with all applications and identify the contractor you have selected below. In cases where two quotes are not feasible please provide rational:**

Click or tap here to enter text.

**Selected contractor(s):**

Click or tap here to enter text.

## Reporting Requirements

* **The Triple-P program uses a reimbursement model. When you have proof of purchase documents totaling your minimum required project spend (prior to taxes), a claim may be submitted for reimbursements (up to the program maximum of $10,000) at any point within the first 6 months. All claims must be submitted no later than 6 months after approval is given.**
* **To remain eligible for IION funding the Triple-P program reports and yearly client surveys must be completed in a timely manner.**
* **The Triple-P program final report will measure the impact of funding on the company. It is sent out to funding recipients after the funded project has been completed.**
* **Additional proof of purchases documents for items listed in the application and any additional unexpected costs incurred will be requested on the survey to update program records. Please keep all your documentation relating to this project.**

## Terms and Conditions

**Applicant’s signature acknowledges the following:**

* **To obtain a grant, applicants must have a minimum project spend that matches or exceeds the requested grant amount (before taxes); otherwise representing, at minimum, a 50% company contribution. The applicant understands that a minimum project spend is required before taxes, in order to obtain the full amount of funds requested.**
* **The Applicant will be responsible to register as an Innovation Initiatives Ontario North client**
* **Applicants are required to respond to follow-up surveys for up to five years after receiving financial support as required by the funding partner**
* **Innovation Initiatives Ontario North will not be responsible for any contractor charges in excess of the approved amount**
* **The applicant understands that the Triple-P program will not cover any HST incurred with this project**

**Applicant’s failure to meet these conditions, both financial or otherwise, will void all agreements.**

**The applicant acknowledges that Innovation Initiatives Ontario North accepts no responsibility for the contractors’ services provided under this agreement. The responsibility of Innovation Initiatives Ontario North is to issue approved payment to the applicant’s selected contractor. The applicant further acknowledges that Innovation Initiatives Ontario North has a five-year obligation to track the applicant’s commercialization efforts and results. This shall require mandatory reporting (upon request) by the applicant of annual revenues, job creation and other related information as required.**

**The applicant acknowledges the right of Innovation Initiatives Ontario North to audit the Eligible Activity and the right of representatives of the Minister of Innovation, Science and Economic Development to audit, or cause to have audited, the accounts and records of the applicant and to have a right of access to the books and the applicant’s accounts. The applicant shall be required by Innovation Initiatives Ontario North to act as its agent for the purpose of any inquiry undertaken by the Auditor General of Canada with respect to the use of funds under this agreement. The applicant shall release to Innovation Initiatives Ontario North, upon request and in a timely manner, for the purpose of releasing to the Auditor General of Canada, all records held by the applicant, or by agents or contractors of the applicant, relating to the contribution agreement and the use of funds; and; such further information and explanations as the Auditor General, or anyone acting on behalf of the Auditor General may request relating to any part of the contribution agreement or the use of funds.**

**The applicant agrees to comply with all federal, provincial, territorial, municipal and other applicable laws governing the applicant or the applicant’s activity, or both, including, but not limited to, statutes, regulations, by-laws, rules, ordinances and decrees. This includes legal requirements and regulations relating to environmental protection.**

**The applicant agrees to acknowledge the federal government’s role in the funding provided through this agreement in all of its project-related communications activities and consent to a public announcement of the eligible activities by or on behalf of the Minister of Innovation, Science and Economic Development in the form of a news release. The Minister of Innovation, Science and Economic Development will inform the applicant of the date of any public announcement at least three weeks prior to the date of the activity / event. The applicant consents to the participation of the Minister of Innovation, Science and Economic Development, or the Minister’s representatives, at such an announcement event. The applicant will agree to display promotional material provided by the Minister of Innovation, Science and Economic Development at such an event along with the requirements found in the Communications Requirements section of the FedNor website (fednor.gc.ca), located under resources.**

**NOTE: Release of confidential or competitively sensitive information will not be required as this is protected under the Access to Information Act. Any information given to Innovation Initiatives Ontario North that is not publicly available will be treated as confidential. Innovation Initiatives Ontario North will make all reasonable efforts to keep the information confidential within the Review Committee approval process. Confidential information will not be used except as reasonably required to provide our services. Should it be formally requested in writing, any physical documentation provided to Innovation Initiatives Ontario North by the Client will be returned upon review and will not be copied or transcribed**

**I certify that my answers are true and complete to the best of my knowledge.**

**If this application leads to approval, I understand that false or misleading information in my application may result in removal from the program.**

**I understand that checking this box constitutes a legal signature confirming that I have read, understand and agree to the above terms and conditions and that I have the authority to sign on behalf of the applicant.**

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature:** | Type your first and last name as a signature | **Date:** | Click or tap to enter a date. |

## Office Use Only

**Approved Maximum Grant:**

**Anticipated Total Project Costs:**

**Registered as an IION Client:** **Yes**  **No**

|  |  |  |
| --- | --- | --- |
| **Innovation Centre Approval:** |  |  |
|  | **Signature** | **Date** |