

BORDEN-CARLETON DEVELOPMENT FUND

Application Form

CONTACT INFORMATION					
Legal Name of Applicant:					
Contact Name:					
Mailing Address:					
Postal Code:	Phone Number:				
E-mail:	Fax Number:				
Business Number:					
Organization:					
Type:					
Local or regional government	☐ Incorporated				
☐ Public sector	☐ Unincorporated				
Not-for-profit entity	☐ Other:				
For Profit					
Mandate:					
Current/Past Activities:					
·					
PROJECT INFORMATION					
Expected Start Date:	Expected Completion Date:				
Title of Project:	·				
Description of Project:					
Project Objective:					

_				Project Benefits:
		ECT BUDGET	PROPOSED PRO	
Quotes	Cost (\$)		of Cost	Description
		NG SOURCES	PROPOSED FUND	
Share %	Pending	Confirmed	Amount	Source
				
ate)	(Date		(Title	(Name)
W	to the hest of my	ition is accurate	ided in this applic	I certify that all information incl

Please return completed application and supporting documents to:

Central Development Corporation Ltd.
106 Linkletter Avenue
P.O. Box 3981
Central Bedeque, PE COB 1G0
Phone: 902-887-3400 / Fax: 902-887-2400
info@centralpei.ca