



*Community Facility  
Enhancement Program*

# Community Facility Enhancement Program (CFEP)

## *Application*

### Quarterly Application Deadlines

March 15

June 15

September 15

December 15

Funded by the Government of Alberta through the Alberta Lottery Fund in order to build strong communities and enhance the quality of life for Albertans.

*Incomplete applications will not be considered.*

Please keep a copy of your application for your records.



**Government  
of Alberta** ■

**APPLICANT INFORMATION**

Incorporated (Legal) Name of Organization (must match provincial incorporation name)

Northern Lights Estates Homeowners Association

Common Name of Organization (if different from incorporated name):

Act your group is registered under

Alberta Society Act

Registration Number 5014653611	Registration Date April 24, 2009	
<input type="checkbox"/> CRA Registered Charity	CRA Registration Number	CRA Registration Date

Address of Applicant Organization:  
301 - 26023 TWP 544

City: Sturgeon County	Province AB	Postal Code T8T 0E4	Country: Canada
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Mailing/Delivery Address\* (same as above?  Yes  No *If no, please provide details below*)

City: Sturgeon County	Province: AB	Postal Code: T8T 0E4	Country: Canada
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\*All correspondence will be mailed to this address.

**Project Contact** (This is the person we will call for project information)

Mr.  Mrs.  Ms.

Name Van Vuong		Title President	
Daytime Phone 780-232-9379	ext.	Fax 780-497-1188	email van_vuong@saveontelecom.com

**Signing Authority Contact** (This is the legal/financial signing authority for the organization)

Mr.  Mrs.  Ms.

Name: Van Vuong		Title President	
Daytime Phone 780-232-9379	ext.	Fax 780-497-1188	email van_vuong@saveontelecom.com

## PROJECT OVERVIEW

**Project Name:** Northern Lights Estates - Recreation Centre

**Main Category (pick one)**

- |  |   |                                  |
|--|---|----------------------------------|
| <input checked="" type="checkbox"/> Community Services | <input type="checkbox"/> Arts                 | <input type="checkbox"/> Culture |
| <input type="checkbox"/> Education                     | <input type="checkbox"/> Environmental        | <input type="checkbox"/> Health  |
| <input type="checkbox"/> Social Services               | <input type="checkbox"/> Sport and Recreation | <input type="checkbox"/> Other   |

**Project Scope (pick one)**

- Local       Provincial

**Project type (pick one)**

- Acquisition of land or buildings       Capital Debt Reduction  
 Facility Construction or Renovation       Facility Assessment or Facility Study  
 Other (please describe) \_\_\_\_\_

**Group that will benefit from the project (pick one):**

- Children       Men       Seniors       Other (please specify): \_\_\_\_\_  
 Women       Youth       General Public

**Project Location**

Name of Facility (if applicable) Northern Lights Estates Pond

Address or legal description Plan 9724236 Lot 2 and Lot 3

City Sturgeon County      Province Alberta      Postal Code T8T 0E4

Facility Operator Northern Lights Estates Homeowners Association

Please enter the operator of the facility or site

Facility Title holder Northern Lights Estates Homeowners Association

Please enter the name of the title holder for the facility or site. Letter of support from the title holder must be included if title holder is not the same as the operator. If a lease is involved, indicate the term of the lease 0 years.

**Organization Overview**

What is the purpose of your organization?

For the community within the vicinity of Northern Lights Estates to gather and discuss community needs and safety issues, particularly for seniors and children

What services do you provide to the community?

Street cleaning, lawn management, snow removal and garbage management within the Northern Lights Estates

### Project Description

- a. Explain what you want to do with the funds. This includes a description of the issues and benefit to the community.  
Presently there is an open space (per attachment 1 and 2) within the Northern Lights Estates which can be developed into a recreation area for the community. This will consist of building a storm pond with safety features that will beautify the area and also be a safe recreation place for seniors, children and community members to enjoy.
- b. How many people do you estimate or know will benefit from this grant?  
Approximately 1000 people
- c. If your grant is successful, how long will it take to complete your project once funding is approved?  
2 to 4 months

### Need For Financial Assistance

- a. If your organization has a current operating surplus, operating reserves or unrestricted cash assets, explain what you plan to do with these funds, if they are not allocated to this project.

Currently the available funds are to be used to purchase equipment to maintain the lawns, trees, streets within the Northern Lights Estates

- b. If your organization has a current operating or accumulated deficit, explain how the deficit was acquired and your plan for reducing it.  
N/A

Does your agency currently have any other projects where you received funding from another Government of Alberta program?

Yes  No

If yes, provide details.

If you answered yes above, is there final reporting overdue from the respective Government of Alberta program area?

Yes  No

If yes, provide details

Have you applied for, or already received, funding for this project from any other Government of Alberta funding program?

Yes  No

If yes, provide details

### Capital/equipment purchase applications

Will the capital asset/equipment be owned and operated by your organization?  Yes  No

#### Mandatory Attachments

- Financial Statement
- List of Executives. Include a complete listing of Board Members and Organization Executive (i.e. CEO, Treasurer, or equivalent positions) along with a daytime phone number and email, if available.
- Facility owner support (if applicable)
- Estimates, supplier quotations or sources of estimates
- Other supporting documentation

