



Athlii Gwaii Legacy Renewables: Small Projects Application

Please complete and submit this document by email to the Athlii Gwaii Legacy Project Specialist agl@gwaiitrust.com. If you have any questions regarding the application process, we can be reached at 250-626-7167.

Part 1: Project Summary

Project Title		Date Submitted (DD MM YYYY)	
Organization (Legal Name)		Project Location	
* Requested Amount:			
* Partial Requested Amount: (in the event of grant oversubscription, the board requires this to maximize grant dollars)			
* MANDATORY			
Expected Start Date (DD MM YYYY)		Expected End Date (DD MM YYYY)	
Primary Contact Information			
Name		Title	
Email		Work Phone	Work Extension Cell Phone
Mailing Address		City	Province Postal Code
Please let us know if there are any considerations we should have while trying to contact you (e.g. working from home and only reachable by cell phone, alternate working hours, etc.)			
APPLICATION DEADLINE: SEPTEMBER 30, 2026			

Use and disclosure of information:

The Gwaii Trust Society collects, uses and discloses personal information for the purposes of delivering the Athlii Gwaii Legacy Grant Program. By submitting an application, the Participant consents and agrees that the GTS administrators and their contractors and authorize agents may:

- contact the Participant by phone, mail, email, or other method to administer, implement, evaluate, and research all elements of the program, verify information, share information on additional rebate opportunities, and to conduct surveys.
- collect and use information (including personal information) contained in the application or acquired during participation in the program (including during virtual assessments and site verification) and may disclose the information to affiliates and contractors, any Collaborating Party to administer, implement and evaluate the program, to conduct research, to confirm eligibility, to verify compliance, for quality assurance, and to develop other programs.

Administrators, collect, use and disclose personal information pursuant to section 15(b)-(e) of the Terms and Conditions in accordance with the Freedom of Information and Protection of Privacy Act (FIOPPA), sections 26 (c) and (e). For more information contact: agl@gwaiitrust.com or mail to P.O. Box 588, Masset, B.C., V0T 1M0 attn: AGL Project Specialist.





COMMUNITY SUPPORT ACKNOWLEDGMENT

If selected for funding, we will create a Contribution Agreement that will need to be signed by the Council of the Haida Nation and the local Municipality.

Please provide the information below for signing authority for the Nation and Municipality so if funding is awarded, the agreement can be signed promptly.

Council of the Haida Nation Signing Authority

Name	Title
Email	Phone Number
Signature	

Local Municipality Signing Authority

Name	Title
Email	Phone Number
Signature	

Part 3: Budget

Project Budget Summary					
Please outline the estimated expenses and identify the source of the funding for each expense, including the portion you are applying for funding from the AGL Renewables program, also including in-kind contributions We require quotes for expenses greater than \$15,000. Line items under \$15,000 do not require a quote, but should be itemized in the budget. Please feel free to use an alternative template to provide this information. Please refer to the AGL Renewables Application Funding Guide for a list of eligible and ineligible expenses.					
Project Expense		Funding Source (AGL or Other)	Funding Status	Total Amount	Timeline
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					
* Total Project Budget:					
* <u>Full</u> Amount Requesting from Athlii Gwaii Legacy Renewables program:					
* <u>Partial</u> Amount Requesting from Athlii Gwaii Legacy Renewables program that you can still work with:					

*These fields are mandatory



Part 4: Required attachments for DSM & CE Small Projects Funding Application

Please ensure that each document is attached as a part of your complete Project Funding Application.

We ask that you label your files with the corresponding names in this list of attachments.

Community Energy Plan

Projects should be informed by a CEP that contains a DSM implementation plan and high-level assessment.

We strongly recommend that a CEP be completed prior to DSM projects.

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Detailed Project Budget and Quotes

Community-led projects must have a project budget that outlines all of the project costs including an itemized list of audits and evaluations, eligible retrofit measures & activities, product details, installation costs, warranty and repair information, etc. Additionally, we require quotes for expense greater than \$15,000.

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Project Plan and Schedule

A project plan to demonstrate project activities and how deliverables are outlined and managed must be attached.

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Community Support Documentation

An authorized signatory from both the Council of the Haida Nation and local municipality required to confirm community support (see page 3).

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Project Team Information

Any information to demonstrate the team's experience and qualifications in managing the proposed project. For community-led projects, please provide information on contractors.

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Part 5: Authorization

I (we) certify that the information in this application and associated attachments reflect an accurate description and estimate of the costs, job creations, and financial projections for the project.

I (we) agree that information provided in this application may be shared with Gwaii Trust Society staff, Board of Directors and consultants.

I (we) authorize Gwaii Trust Society staff, Board of Directors and consultants to make enquiries of such persons or organizations operating in the project's field of activities as deemed necessary to reach a decision on this application.

I (we) understand that the application may not be approved, and agree to follow all Gwaii Trust Society staff, Board of directors and consultants procedures for discussing the funding decisions.

I (we) have read and understood Gwaii Trust Society policy on dealing with harassment of staff by clients, and will adhere to the policy <https://gwaiitrust.com/our-story/financials-policies/>

By entering my name here electronically, I authorize all of the above for this application:

Name of Organization Signing Authority	Title	Date (DD MM YYYY)

Consents

With your consent, Gwaii Trust Society may share this application and supporting materials with other entities to better support projects. Please indicate whether you consent to have your proposal shared with the following:

A) Departments or Agencies across the Council of the Haida Nation	☐ Yes	☐ No
B) Departments or Agencies across the Government of Canada	☐ Yes	☐ No
C) Departments or Agencies across the Government of British Columbia	☐ Yes	☐ No

☐	I have received permission from the contractors/consultants who provided supporting documents for this application to provide their personal information to Athlii Gwaii Legacy for program use. Personal information is defined as recorded information about an identifiable individual other than contact information
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