



## Part 2: Community Energy Plan Details

### Community Energy Planning to Date

*Please outline any previous community energy planning activities completed to date, including date and consultant where relevant. Please submit any previous plans along with your application.*

DRAFT  
DO  
NOT  
USE



**Intent, Outcomes, Activities & Deliverables**

*Please list the outcomes, activities, and deliverables anticipated for this project and any relevant work done to date.*

DRAFT

**Community Engagement**

*Please explain the role and engagement of community members in the development/update of the CEP (including support from any communities who share the same micro-grid). Please describe how you plan to continue community engagement during and after the completion of the CEP.*

NOT  
USE



**Signing Authority**

*If selected for funding, we will create a Contribution Agreement that will need to be signed by the Council of the Haida Nation and/or Municipality. Please provide the information below for signing authority for the Nation or Municipality so if funding is awarded, the agreement can be signed promptly.*

| Name  | Title        |
|-------|--------------|
|       |              |
| Email | Phone Number |
|       |              |

DRAFT  
DO NOT USE

## Part 3: Budget

### CEP Budget

Please outline the estimated CEP 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.

|   | CEP Activity | Responsible | Funding Source (AGL or Other) | Funding Status | Total Amount |
|---|--------------|-------------|-------------------------------|----------------|--------------|
| 1.  |              |             |                               |                |              |
| 2.  |              |             |                               |                |              |
| 3.  |              |             |                               |                |              |
| 4.  |              |             |                               |                |              |
| 5.  |              |             |                               |                |              |
| 6.  |              |             |                               |                |              |
| 7.  |              |             |                               |                |              |
| 8.  |              |             |                               |                |              |
| 9.  |              |             |                               |                |              |
| 10.   |              |             |                               |                |              |
| <b>Total Project Budget:</b>  |              |             |                               |                |              |
| <b>Full Amount Requesting from Athlii Gwaii Legacy: Renewables grant program:</b>                   |              |             |                               |                |              |
| <b>Partial Amount Requesting from Athlii Gwaii Legacy: Renewables that you can still work with:</b> |              |             |                               |                |              |



## Part 4: Required attachments for the CEP 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.

|  |                          |
|--|--------------------------|
| <p><b>CEG Budget and Quotes</b></p> <p>Community-led CEPs must have a budget that breaks down the total cost of the CEP report. Additionally, we require quotes for any expenses over \$15,000.</p>  | <input type="checkbox"/> |
| <p><b>CEG Plan and Schedule</b></p> <p>A plan to demonstrate activities and how the CEP report will be managed.</p>  | <input type="checkbox"/> |
| <p><b>Community Support Documentation</b></p> <p>A letter from an authorized signatory on an official letterhead is required to confirm community support to participate in the Renewables grant program. Contact the AGL Project Specialist on alternate support documentation.</p> | <input type="checkbox"/> |
| <p><b>CEG Project Team Information</b></p> <p>Any information to demonstrate the team’s experience and qualifications in managing the CEP. Community-led CEPs should submit information on consultants and partners as well.</p>   | <input type="checkbox"/> |
| <p><b>Previous Community Energy Plans if applicable</b></p> <p>Any previous EPS, CEEPs, or similar documents.</p>  | <input type="checkbox"/> |



### Part 5: Authorization

I (we) certify that the information in this application and associated attachments reflect an accurate description and estimate of the costs, proposed outcomes, 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 Board's 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://gwaitrust.com/our-story/financials-policies/>

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

|   |              |                          |
|---|--------------|--------------------------|
|   |              |                          |
| <b>Name of Organization Signing Authority</b> | <b>Title</b> | <b>Date (DD MM YYYY)</b> |

### Consents

With your consent, Gwaii Trust Society will share this application and supporting materials with other entities to better support projects.

|  |                              |
|--|------------------------------|
| A) Departments or Agencies across the Council of the Haida Nation    | <input type="checkbox"/> Yes |
| B) Departments or Agencies across the Government of Canada           | <input type="checkbox"/> Yes |
| C) Departments or Agencies across the Government of British Columbia | <input type="checkbox"/> Yes |

|                          |   |
|--------------------------|---|
| <input type="checkbox"/> | <b>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</b> |
|--------------------------|---|