

TOURISM ECONOMIC DEVELOPMENT FUND

APPLICATION

Project Name:
Brief Project Description:
Projected Job Creation:
Consistency with Miramichi – Atlantic Canada's Great Outdoor:
Consistency with Miramichi – Atlantic Canada's Great Outdoor:

APPLICANT INFORMATION				
Contact Person: (Role or Title)	Organization/Company:			
Is the above noted person authorized to speak on behalf of the organization/company? Yes No				
Phone:	Email:			
Mobile:				
Nature of Business:	Corporate Registry?			
Type of Business: ☐ Sole Proprietorship ☐ Partnership ☐ Corp Other (please explain):	oration			
Number of Employees (If applicable):	Number of Members (If applicable):			

CITY OF · VILLE DE

COMPANY OR ORGANIZATION LEADERSHIP (PLEASE LIST THE SENIOR POSITIONS OF THE COMPANY OR ORGANIZATION)			
CEO / President / Chair:	Phone:	Email:	
Vice President / Chair:	Phone:	Email:	
Secretary:	Phone:	Email:	
Treasurer:	Phone:	Email:	
Other:	Phone:	Email:	

REQUIRED ATTACHMENTS				
The following items must be attached to this Form:				
		For Office Use Only		
		Office Verification		
Initial:	Project Proposal	Initial:		
Initial:	Project Proposal Includes Mandatory Criteria	Initial:		
Initial:	Corporate Registry (Not Applicable if Applicant is a private individual)	Initial:		
Initial:	Additional Letters of Support (if applicable)	Initial:		
Initial:	WorkSafe NB	Initial:		
Initial:	Commercial Liability Insurance	Initial:		

