

Community Capital Funding Project Scope Change Request

If the scope of the project for which funds were received has changed, this form must be completed for approval prior to undertaking change in scope.

Organization Name: _____ Year funds received: _____

Contact Person: _____ Phone: _____

Approved Capital Project(s) Being Impacted: _____

New Capital Project Name: _____

Total capital grant funds received	\$ _____	Expected completion date: _____
Grant funds used	\$ _____	
Amount requested for use on new capital project	\$ _____	

Describe the new capital project the grant funds would be used for. Explain how this project will benefit the community. Provide budget details for the new capital project.

Revenue / Project funding		Project Expenditures *attach quotes	
Sturgeon County Grant Funds	\$ _____	Planning/Engineering	\$ _____
Other Grants	\$ _____	Contracted Services	\$ _____
Fundraising/Donations	\$ _____	Construction Materials	\$ _____
Facility Rental	\$ _____	Hired Equipment Costs	\$ _____
Volunteer Hours	\$ _____	Volunteer Hours	\$ _____
Other (specify)	\$ _____	Other (specify)	\$ _____
Total Revenue	\$ _____	Total Expenditures	\$ _____

Applicant Signature: _____ Date: _____