Indigenous Energy Projects Program 2.1

Application Form

Instructions

1. Please review all eligibility criteria to confirm that your Community, Organization and Project are eligible for funding through the Energy Support Programs (ESPs). Eligibility criteria are available in the Program Guidelines.
2. Applications will be accepted by the IESO on an ongoing basis with Application review dates spread throughout the year. Application review dates will be posted to the IEP Program Website. Evaluation criteria are available in the Program Guidelines.
3. Capitalized terms used in the Application, unless otherwise stated, are defined in the Program Guidelines and Funding Agreement sample.
4. Where the applicant is applying to the IEP Program for more than one Project, the applicant must submit a separate Application for each Project.
5. This Application form must be used to submit the Application. No other formats will be accepted. All fields must either be completed or marked "not applicable".
6. The Application form, including Section 6: Application Checklist (Attachment Requirements), must be completed in its entirety to be considered for funding. Where a joint Application is being submitted by two or more applicants, Appendix A and Appendix B must be completed in their entirety by each applicant and the applicant identified in Section 1 of the Application form will be identified as the lead applicant.
7. Applicants are encouraged to contact IEP staff with any questions at (416) 969-6317 or iep@ieso.ca. Program staff are available to provide feedback and guidance throughout Application development.
8. As a condition of funding support, the IESO may require changes to the Project scope, design or Budget, and may ask for additional information or references. Please allow sufficient time for Application review and feedback prior to submittal of your final Application.
9. The signatory identified in the Application form for all applicants, including joint applicants, must have the ability to bind the applicant.

10. When you are ready to submit your Application, please save the completed Application form in a fixed form (i.e. PDF) and submit to the IESO along with all required attachments. The Application form can be submitted to the IESO in soft or hard copy to either:

    Email: iep@ieso.ca
    Mail: Independent Electricity System Operator
    120 Adelaide Street West, Suite 1600
    Toronto, ON M5H 1T1
    Attention: Education and Capacity Building Program

Section 1: Application Title Page

Title	Description
1. Lead applicant name: *(Name of the Community or Organization)*	
2. Lead applicant mailing address:	
3. Lead applicant type:	☐ First Nation or Métis Community ☐ First Nation or Métis Organization If applying as an Organization, please list the represented Communities below that make up this Organization: ☐ Other: If 'Other,' please describe the entity:
4. Is this Application being submitted on behalf of joint applicants? *(Select "Yes" only if this is a joint application)*	☐ Yes ☐ No If 'Yes', please list all joint applicants: If **Yes**, Appendix A," Joint Applicant Information Form" and Appendix B, "Joint Applicant Declaration Page" must be completed for each joint applicant.

<table>
<tr><th>Title</th><th colspan="3">Description</th></tr>
<tr><td>5. IEP Program Stream:

(Please select the stream and applicable sub-stream(s) relevant to this Application)</td><td colspan="3">☐ Project and Partnerships
☐ Project Development
☐ Feasibility Study
☐ Partnerships
☐ Innovation</td></tr>
<tr><td>6. Project Title:</td><td colspan="3"></td></tr>
<tr><td rowspan="6">7. Project Team members and roles:

(This must include a minimum of three community or organization members)</td><td>Team Member Name</td><td>Team Member Organization</td><td>Team Member Title</td></tr>
<tr><td></td><td></td><td></td></tr>
<tr><td></td><td></td><td></td></tr>
<tr><td></td><td></td><td></td></tr>
<tr><td></td><td></td><td></td></tr>
<tr><td></td><td></td><td></td></tr>
<tr><td rowspan="4">8. Project Partners or potential Project Partners (if applicable):</td><td colspan="2">Partner or Proposed Partner Name</td><td>Relationship to Applicant</td></tr>
<tr><td colspan="2"></td><td></td></tr>
<tr><td colspan="2"></td><td></td></tr>
<tr><td colspan="2"></td><td></td></tr>
<tr><td rowspan="2">9. Total Funding Requested:

(This amount must match the amount listed in the Work Plan & Budget below)</td><td colspan="3">$ 0.00

The Maximum Funding Amount is the lesser of 80% of Project Costs, and the following amount per stream, to a maximum of $200,000.00 per First Nation or Métis Community/Organization per calendar year:</td></tr>
<tr><td colspan="2">Project Development: Up to $150,000.00</td><td>Partnerships: Up to $50,000.00</td></tr>
</table>

Title	Description	
	Feasibility Study: Up to $25,000.000	*Innovation: Up to $200,000.00*
	Note: The maximum funding under the Projects and Partnerships stream will not exceed $150,000.	

Section 2: Applicant Contact Information

Title	Description	
1. Primary contact:	Name:	
	Title:	
	Mailing address:	
	Phone number(s):	Main Alternate
	Fax:	
	Emails:	
	Preferred method of contact:	Select
2. Secondary contact:	Name:	
	Title:	
	Mailing address:	
	Phone number(s):	Main Alternate
	Fax:	
	Emails:	
	Preferred method of contact:	Select
3. Signatory:	Name:	
	Title:	
	Mailing address:	

Title		Description
*(Signatory **must** have the signing authority to bind the applicant)*	Phone number(s):	Main Alternate
	Fax:	
	Emails:	
	Preferred method of contact:	Select

Section 3: Project Information

Description
1. Description of Community or Organization (150 words maximum) Please provide a basic description of the First Nation or Métis Community or First Nation or Métis Organization that the that the Project will benefit, and their energy priorities.
2. Applicant eligibility (50 words maximum) Please describe how the lead applicant meets the eligibility requirements of the IEP Program. *(See Program Guidelines for eligibility requirements)*

Description
3. Project purpose and description (300 words maximum) Please provide a detailed description of the Project and the applicant's motivation for undertaking the Project. Please outline which category/ies the Project falls under and provide a brief description of how the Project meets the scope of the category/ies identified.

Description
4. Community Energy Plan (CEP) Linkage and Implementation (200 words maximum) If the First Nation or Métis Community, or First Nation or Métis Organization has completed a community energy plan, please indicate that here. Please indicate how the project relates to the long-term energy vision of the First Nation or Métis Community, or First Nation or Métis Organization and how it is supported through other elements of the CEP implementation.
5. Project Team (100 words maximum per Project Team member) Include a brief description of each member of the Project Team and provide detail demonstrating how they are qualified to support the success of the Project.

Description
6. Anticipated impact on Community (200 words maximum) Please provide a detailed description of the anticipated impact on the applicable First Nation or Métis Community or First Nation or Métis Organization. This can include: a. Contributions to energy security b. Social/economic benefit c. Increased knowledge and understanding of energy and energy system participation
7. Community engagement (150 words maximum) Describe how Community or Organization members have been or will be involved, and what supports or systems are in place in the community to oversee the development of the project. Please include a Band Council Resolution, board resolution, or other endorsing document as appropriate with your Application. In the case of joint Applications, all joint applicants must provide a Band Council Resolution, board resolution, or other endorsing document as appropriate.

Section 4: Work Plan and Budget

1. Please provide information for the Work Plan and Budget in the following table. Please refer to the Sample Work Plan and Budget included below, to support your completion of Section 4.

2. You will be required to provide detailed information on each Activity that will be undertaken for the Project which must include a detailed description of the scope of Work, IEP Team members conducting the Work, and Budget. The Work Plan and Budget table provides space for five (5) Milestones. If you require additional lines for Activities, please visit the Website and download the Work Plan and Budget: Additional Activities Form, complete it in accordance with these instructions and submit with your Application.

    a. Scope of Work for the Activity: the detailed description must include, but is not limited to:

        1) a detailed description of the Activity

        2) how the Work will be managed

        3) how any Costs for this activity related to Travel, Meal and Hospitality will remain in compliance with Section 3(c) of the Program Guidelines and in accordance with the Ontario Travel, Meal and Hospitality Expenses Directive.

    b. Under the Budget, "Total Funding from Other Source(s)" must be deducted from the 'Total Cost of Activity/ies' before determining the eligible Total IEP Funding Requested. The "Total IEP Funding Requested" must be no greater than 80% of the "Total Cost of Activity".

    c. *Name of Other Sources of Funding*

        1) You will be required to identify the name of any other sources of funding who will be providing any funding in respect of each Activity in the table and the amount of funding being provided.

    d. For each Activity, you must identify any and all Internal Resources and External Resources that will be undertaking the Activity. The IEP Team members should comprise of the individuals listed under Section 1 of the Application. Please list each Internal Resource and External Resource by individual.

3. The *Total Requested Funding for all Milestones under IEP* is inclusive of all Activities for which you are requesting funding through the IEP Program, including any Activities identified on the *Work Plan and Budget Additional Activities Form.*

4. Funding provided under the IEP Program will be provided for Eligible Expenses that are incurred directly by the successful applicant in order to complete the Project that are, in the sole and absolute discretion of the IESO, directly related to, and reasonably necessary to complete, the Project, up to the Maximum Funding Amount set out in Section 3(b) of the Program Guidelines. Funding will not be provided for any Ineligible Expenses that are identified in Section 3(c) of the Guidelines.

    a. The Maximum Funding Amount provided for a Project funded under the IEP Program will be the lesser of 80% of the total Project costs and the following maximum funding amounts:

1) Project Development: $150,000.00

2) Feasibility Study: $25,000.00

3) Partnerships: $50,000.00

4) Innovation: $200,000.00

Note: The maximum funding under the Projects and Partnerships stream (i.e., Project Development, Feasibility Study and Partnerships) will not exceed $150,000.00.

5. Funding for Renewable Energy Project Partnerships or Transmission Project Partnerships are limited to the following Activities:

   a. Due diligence with respect to whether the Recipient should enter into a Renewable Energy Project Partnership or Transmission Project Partnership with a Project Partner.

   b. Establishing an organizational structure for the entity that will hold the Economic Interest in, and/or Control, the entity that owns the Project.

   c. Meetings to support the Renewable Energy Project Partnership or Transmission Project Partnership, including with respect to corporate structure discussions and due diligence activities

6. Funding in respect of Transmission Projects is only eligible for the development of Transmission Project Partnerships.

SAMPLE WORK PLAN AND BUDGET (excludes HST)							
	Activities to be Completed	**Resource Name, Title, Company and Logistics**	**Total Cost of Resource**	**Targeted time Required for Activity**	**Targeted Start Date**	**Planned Output(s)**	**Budget Total Cost of Activity (excludes HST)**
Milestone 1 (Sample Only)	**1.1 Community engagement activities to generate community awareness and support for a 40kW ground mounted solar project.** **Scope of Work:** - Two outreach meetings to provide information to community members regarding potential risks and benefits to the community of the potential project development, and engage in a feedback session. One meeting will be held in January, the other a month afterwards. - Updates to the community website to provide information on the upcoming meetings, as well as posting meeting minutes and the time spent for creation of an online forum via social media to collect additional feedback.	Darryl Michaels, Energy Coordinator, ABC First Nation	$1,500.00	1 Month	January 1, 2021	- Two (2) outreach community meetings - Updates to the community website - Hand out 500 pamphlets outlining details of the solar project in English and Cree - Engage 50 community members	$10,000.00
		Janet Smith, Communications Lead, ABC First Nation	$1,500.00				
		Quentin McIntyre, Associate Engineer, Engineering Firm ABC	$1,500.00				
		Quentin McIntyre, Associate Engineer, Engineering Firm ABC	$1,500.00				
		Logistics Cost	$4,000.00				

<table>
<tr><th colspan="8">SAMPLE WORK PLAN AND BUDGET (excludes HST)</th></tr>
<tr><th></th><th>Activities to be Completed</th><th>Resource Name, Title, Company and Logistics</th><th>Total Cost of Resource</th><th>Targeted time Required for Activity</th><th>Targeted Start Date</th><th>Planned Output(s)</th><th>Budget Total Cost of Activity (excludes HST)</th></tr>
<tr><td rowspan="6">Milestone 1 (Sample Only)</td><td rowspan="3">1.2 Contracting for Project Design

Scope of Work:
- Identify and contract a vendor to design, procure and install the 40kW ground mounted solar project, and provide services throughout the entirety of the project.</td><td>Darryl Michaels, Energy Coordinator, ABC First Nation</td><td>$5,000.00</td><td rowspan="3">2 Months</td><td rowspan="3">February 1, 2021</td><td rowspan="3">- Issue project RFP
- Final contract with selected solar project vendor</td><td rowspan="3">$25,000.00</td></tr>
<tr><td>Janet Smith, Communications Lead, ABC First Nation</td><td>$10,000.00</td></tr>
<tr><td>Quentin McIntyre, Associate Engineer, Engineering Firm ABC</td><td>$10,000.00</td></tr>
<tr><td colspan="5"></td><td colspan="2">Total Cost of Activity/ies</td><td>$35,000.00</td></tr>
<tr><td colspan="2">Name of Other Source(s) of Funding</td><td colspan="3">XYZ Federal Indigenous Capital Grant</td><td colspan="2">Total Funding from Other Source(s) if applicable</td><td>$5,000.00</td></tr>
<tr><td colspan="6">Total Requested Funding for Milestone 1 under IEP
(Total Cost of Activity/ies – Total Funding from Other Source(s)
Up to 20% of the Maximum Funding Amount Requested</td><td>$30,000.00</td></tr>
</table>

WORK PLAN AND BUDGET (excludes HST)							
	Activities to be Completed	**Resource Name, Title, Company and Logistics**	**Total Cost of Resource ($)**	**Targeted time Required for Activity**	**Targeted Start Date**	**Planned Output(s)**	**Budget Total Cost of Activity (excludes HST) ($)**
Milestone 1	**1.1**		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
	1.2		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				

Milestone 1	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) ($)
	1.3		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
						Total Cost of Activity/ies	**$0.00**
	Name of Other Source(s) of Funding					**Total Funding from Other source(s) if applicable**	**$0.00**
						Total Requested Funding for Milestone 1 under IEP *(Total Cost of Activity/ies – Total Funding from Other Source(s)* **Up to 20% of the Maximum Funding Amount Requested**	**$0.00**

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) ($)
Milestone 2	**2.1**		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
	2.2		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) ($)
Milestone 2	**2.3**		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
	Total Cost of Activity/ies						**$0.00**
	Name of Other Source(s) of Funding			**Total Funding from Other Source(s) if applicable**			**$0.00**
	Total Requested Funding for Milestone 2 under IEP *(Total Cost of Activity/ies – Total Funding from Other Source(s)*						**$0.00**

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST)($)
Milestone 3	**3.1**		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
	3.2		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) ($)
Milestone 3	**3.3**		$0.00				**$0.00**
			$0.00				
			$0.00				
			$0.00				
			$0.00				
	Total Cost of Activity/ies						**$0.00**
	Name of Other Source(s) of Funding			**Total Funding from Other Source(s) if applicable**			**$0.00**
	Total Requested Funding for Milestone 3 under IEP *(Total Cost of Activity/ies – Total Funding from Other Source(s)*						**$0.00**

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) ($)
Milestone 4	**4.1**		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
	4.2		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST)($)
Milestone 4	**4.3**		$0.00				**$0.00**
			$0.00				
			$0.00				
			$0.00				
			$0.00				
	Total Cost of Activity/ies						**$0.00**
	Name of Other Source(s) of Funding			**Total Funding from Other Source(s) if applicable**			**$0.00**
	Total Requested Funding for Milestone 4 under IEP *(Total Cost of Activity/ies – Total Funding from Other Source(s)*						**$0.00**

	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST) ($)
Milestone 5	**5.1**		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				
	5.2		$0.00				
			$0.00				
			$0.00				**$0.00**
			$0.00				
			$0.00				

Milestone 5	Activities to be Completed	Resource Name, Title, Company and Logistics	Total Cost of Resource ($)	Targeted time Required for Activity	Targeted Start Date	Planned Output(s)	Budget Total Cost of Activity (excludes HST)($)
	5.3		$0.00				**$0.00**
			$0.00				
			$0.00				
			$0.00				
			$0.00				
						Total Cost of Activity/ies	**$0.00**
	Name of Other Source(s) of Funding					**Total Funding from Other Source(s) if applicable**	**$0.00**
						Total Requested Funding for Milestone 5 under IEP *(Total Cost of Activity/ies – Total Funding from Other Source(s)*	**$0.00**

Do you require space for additional Activities?

☐ Yes, a supplementary *Work Plan and Budget: Additional Activities Form* has been attached to this Application for additional Activities.

☐ No, additional space is not required.

If Yes, please transfer Total Cost of Additional Activities for all Milestones from Work Plan and Budget: Additional Activities Form	$0.00
If Yes, please transfer Total Funding from Other Source(s) of Additional Activities for all Milestones from Work Plan and Budget: Additional Activities Form	$0.00
Total Cost of Activity/ies for all Milestones under IEP	**$0.00**
Total Funding from Other Source(s) for all Milestones under IEP	**$0.00**
Total Requested Funding for all Milestones under IEP *(Total Cost of Activity/ies – Total Funding from Other Source(s)*	**$0.00**

Section 5: Applicant Declaration

The following page must be printed, signed and submitted with your IEP Application (for electronic submissions a scanned copy may be provided). Where the Application is in respect of joint applicants, a **signed copy of Appendix B: Joint Applicant Declaration Page B must** be submitted for each joint applicant. Breach of the representations, warranties and agreements may result in the rejection of the Application by the IESO.

I represent and warrant to, and agree with, the IESO, and acknowledge that the IESO is relying on such representations, warranties, and agreements as a condition precedent to the review and, if applicable, the acceptance of this Application, as follows:

1. The information contained in the Application is true, accurate and complete in all material respects.
2. As of the date set out below, the applicant and the Project meet all the applicable eligibility criteria set out in Section 3 of the IEP Program Guidelines.
3. I am not in default, and have never been in default, of any existing agreements with the IESO, its predecessor entities, or any of their third party fund managers, including funding agreements under other support programs.
4. Other than as set out in the Application, I have not received, and do not expect to receive, any funding for any Activities that are, or could be perceived to be, duplicative of funding requested under the Application.
5. I have read the IEP Program Guidelines, and acknowledge that if this Application is successful, the applicant will be required to enter into the IEP Funding Agreement to receive funding.
6. I consent and have sought and received the consent of the applicant's Affiliates for the IESO to (a) communicate with the Affiliates or any other relevant third parties, and (b) use all information, including Confidential Information, in the possession of the IESO, for the purposes of evaluating and accepting or rejecting the Application.
7. I acknowledge that the IESO has advised the applicant to seek independent legal advice with respect to the subject matter of this Application, and subsequently, I acknowledge and agree that the applicant has had the opportunity to do so.
8. I acknowledge that the IESO reserves the right to make public the name of the applicant and any respective Affiliate, the title and summary of the Project, the amount of any funds awarded, and any information in the Application not clearly identified as Confidential Information by the applicant.
9. I acknowledge that the IESO reserves the right to accept or reject any Application for any reason, and that receipt by the IESO of this Application does not constitute a commitment by the IESO to provide funding to the applicant, nor does it create any business relationship between the applicant and the IESO.
10. I acknowledge that the IESO may at any time cancel, suspend or amend all or any part of the IEP Program.

THE APPLICANT HAS READ AND AGREES WITH THE ABOVE DECLARATIONS:

Name of Applicant	**Date**
Signatory's Name (print)	**Signatory Signature** I have the authority to bind the Applicant.

Section 6: Application Checklist (Attachment Requirements)

- The following supporting documentation must be attached with the Application form. **Unless there is a "If Applicable" option, all attachments must be included in your Application submission.**
- Please ensure you have made the appropriate selection under the Status column for each required document and attached all corresponding documentation with your Application.
- Where the Application is being submitted electronically, please identify the file name of each attachment in the "File Name(s) in Submission" column below. Where the Application is being submitted in hard copy, please clearly number each attachment in the upper-right hand corner of the first page of each attachment, and identify the item number in the "File Name(s) in Submission" column below.

Required Document(s)	Status	Additional Instruction	File Name(s) in Submission
Signed Applicant Declaration Page	Select	The Applicant Declaration Page must be printed, signed by the signatory, and scanned (PDF) as part of the Application.	
Signed Joint Applicant(s) Declaration Page(s) (if applicable)	Select	A copy of the Joint Applicant Declaration Page must be provided for each joint applicant. The Joint Applicant Declaration Page must be printed, signed by the signatory for each joint applicant, and scanned (PDF) as part of the Application.	
Joint Applicant(s) Information Page(s) (if applicable)	Select	A completed 'Appendix A: Joint Applicant Information' page is required for **each** joint applicant applicable to this Application.	
Evidence demonstrating support from the applicant Community or Organization	Select	Evidence must be provided that the applicant Community or Organization is supportive of the Application to the IEP Program and the Project.This can include: a) A Band Council Resolution (BCR) b) A board resolution c) Other endorsing documents as appropriate. *Please see Section 4(b) of the Program Guidelines for more information.*	

Required Document(s)	Status	Additional Instruction	File Name(s) in Submission
Evidence demonstrating support from the joint applicant Community or Organization (if applicable)	Select	Evidence must be provided for each joint applicant that the Community or Organization is supportive of the IEP Application and the Project. This can include: a) A Band Council Resolution (BCR) b) A board resolution c) Other endorsing documents as appropriate. *Please see Section 4(b) of the Program Guidelines for more information.*	
Job description for Internal Resource(s) or External Resource(s) not yet hired (if applicable)	Select	A job description is required for each Internal Resource or External Resource not yet retained must be submitted, which must include the qualifications of the Resource and the selection criteria that will be used to retain the individual.	
Community Energy Plan (CEP) data (if applicable)	Select	Where applicants have a CEP, the following data must be included to support a project under the Projects and Partnerships (excluding transmission project sub-stream) and Innovation streams: baseline energy data and energy profile, and justification of project for future community energy development.	

Appendix A: Joint Applicant Information

Instructions:

Please complete this section if the Application is being submitted by joint applicants. If the Application is being submitted by more than one joint applicant, please fill out a Joint Applicant Information form for each applicant:

Appendix A:	**Joint Applicant Information**	
1. Joint applicant name: (Name of the Joint Community or Organization)		
2. Joint applicant type:	☐ First Nation or Métis Community ☐ Remote First Nation or Métis Community ☐ First Nation or Métis Organization *If applying as an Organization, please list the represented Communities below that make up this Organization:* ☐ Other: If 'Other,' please describe the entity:	
3. Signatory: *(Signatory **must** have the signing authority to bind the applicant)*	Name:	
	Title:	
	Mailing address:	
	Phone number(s):	Main Alternate
	Fax:	
	Emails:	
	Preferred method of contact:	Select

Appendix A:	Joint Applicant Information

4. Description of Community or Organization (150 words maximum)

Please provide a basic description of the First Nation or Métis Community, or First Nation or Métis Organization that the Project will benefit, and their energy priorities. If the Community or Organization has completed a community energy plan, please indicate that here.

5. Applicant eligibility (50 words maximum)

Please describe how the joint applicant meets the eligibility requirements of the program.

Appendix B: Joint Applicant Declaration

The following page must be printed, signed and submitted with your IEP Application (for electronic submissions a scanned copy may be provided). Where the Application is in respect of joint applicants, a **signed copy of Appendix B: Joint Applicant Declaration Page B must** be submitted for each joint applicant. Breach of the representations, warranties and agreements may result in the rejection of the Application by the IESO.

I represent and warrant to, and agree with, the IESO, and acknowledge that the IESO is relying on such representations, warranties, and agreements as a condition precedent to the review and, if applicable, the acceptance of this Application, as follows:

1. The information contained in the Application is true, accurate and complete in all material respects.
2. As of the date set out below, the joint applicant and the Project meet all the applicable eligibility criteria set out in Section 3 of the IEP Program Guidelines.
3. I am not in default, and have never been in default, of any existing agreements with the IESO, its predecessor entities, or any of their third party fund managers, including funding agreements under other support programs.
4. Other than as set out in the Application, I have not received, and do not expect to receive, any funding for any Activities that are, or could be perceived to be, duplicative of funding requested under the Application.
5. I have read the IEP Program Guidelines, and acknowledge that if this Application is successful, the joint applicant will be required to enter into the IEP Funding Agreement to receive funding.
6. I consent and have sought and received the consent of the joint applicant's Affiliates for the IESO to (a) communicate with the Affiliates or any other relevant third parties, and (b) use all information, including Confidential Information, in the possession of the IESO, for the purposes of evaluating and accepting or rejecting the Application.
7. I acknowledge that the IESO has advised the joint applicant to seek independent legal advice with respect to the subject matter of this Application, and subsequently, I acknowledge and agree that the joint applicant has had the opportunity to do so.
8. I acknowledge that the IESO reserves the right to make public the name of the joint applicant and any respective Affiliate, the title and summary of the Project, the amount of any funds awarded, and any information in the Application not clearly identified as Confidential Information by the joint applicant.
9. I acknowledge that the IESO reserves the right to accept or reject any Application for any reason, and that receipt by the IESO of this Application does not constitute a commitment by the IESO to provide funding to the joint applicant, nor does it create any business relationship between the joint applicant and the IESO.
10. I acknowledge that the IESO may at any time cancel, suspend or amend all or any part of the IEP Program.

THE JOINT APPLICANT HAS READ AND AGREES WITH THE ABOVE DECLARATIONS:

_____	_____
Name of Joint Applicant	**Date**
_____	_____
Signatory's Name (print)	**Signatory Signature** I have the authority to bind the Joint Applicant.