# Community Energy Champion (CEC) Program 3.2

## Work Plan and Budget: Additional Activities Form

#### **Instructions**

- 1. Please provide detailed information on each Activity that will be undertaken for the Project which must include a detailed description of the scope of Work, any additional resources used, and Budget.
  - 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 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 CEC Funding Requested.
  - c. Name of Other Sources of Funding
    - 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 under CEC expense stream, you must identify any additional External Resources that will be undertaking the Activity and additional Costs to be incurred by the CEC.
- 2. The Total Requested Funding for each Activity for all activities identified on the Work Plan and Budget Additional Activities Form must be included in the Total Requested Funding for all Activities under CEC identified on the Application form under section 4: Work Plan and Budget Form.
- 3. Funding provided under the CEC Program will be provided for Eligible Expenses that are incurred directly by the successful applicant in order to complete the work of the Community Energy Champion as identified in the Application. Funding will not be provided for any Ineligible Expenses that are identified in Section 3(c) of the Program Guidelines.



|                                                                                                                | WORK PLA                                             | N AND BUDGE                          | T (excludes l                                    | HST)                   |                      |                                                  |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------|--------------------------------------------------|------------------------|----------------------|--------------------------------------------------|
| Activities to be Completed                                                                                     | Resource<br>Name, Title,<br>Company and<br>Logistics | Total Cost<br>of<br>Resource<br>(\$) | Targeted<br>time<br>Required<br>for<br>Activity  | Targeted<br>Start Date | Planned<br>Output(s) | Budget Total Cost of Activity (excludes HST)(\$) |
|                                                                                                                | C                                                    | EC EXPENSE S                         | STREAM                                           |                        |                      |                                                  |
| 2.<br>Scope of Work:                                                                                           |                                                      |                                      |                                                  |                        |                      |                                                  |
|                                                                                                                |                                                      |                                      |                                                  | Tota                   | l Cost of Activity   |                                                  |
| Name of Other Source(s) of Funding                                                                             |                                                      |                                      | Total Funding from Other Source(s) if applicable |                        |                      |                                                  |
| Total Requested Funding for Activity 2 under CEC  (Total Cost of Activity – Total Funding from Other Source(s) |                                                      |                                      |                                                  |                        |                      |                                                  |

| WORK PLAN AND BUDGET (excludes HST)                                                                            |                                                      |                                      |                                                 |                                                  |                      |                                                  |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------|-------------------------------------------------|--------------------------------------------------|----------------------|--------------------------------------------------|
| Activities to be Completed                                                                                     | Resource<br>Name, Title,<br>Company and<br>Logistics | Total Cost<br>of<br>Resource<br>(\$) | Targeted<br>time<br>Required<br>for<br>Activity | Targeted<br>Start Date                           | Planned<br>Output(s) | Budget Total Cost of Activity (excludes HST)(\$) |
|                                                                                                                | С                                                    | EC EXPENSE S                         | STREAM                                          |                                                  |                      |                                                  |
| 3.<br>Scope of Work:                                                                                           |                                                      |                                      |                                                 |                                                  |                      |                                                  |
| Total Cost of Activity                                                                                         |                                                      |                                      |                                                 |                                                  |                      |                                                  |
| Name of Other Source(s) of Funding                                                                             |                                                      |                                      | Total Fu                                        | Total Funding from Other Source(s) if applicable |                      |                                                  |
| Total Requested Funding for Activity 3 under CEC  (Total Cost of Activity – Total Funding from Other Source(s) |                                                      |                                      |                                                 |                                                  |                      |                                                  |

| WORK PLAN AND BUDGET (excludes HST)                                                                            |                                                      |                                      |                                                 |                        |                      |                                                  |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------|-------------------------------------------------|------------------------|----------------------|--------------------------------------------------|
| Activities to be Completed                                                                                     | Resource<br>Name, Title,<br>Company and<br>Logistics | Total Cost<br>of<br>Resource<br>(\$) | Targeted<br>time<br>Required<br>for<br>Activity | Targeted<br>Start Date | Planned<br>Output(s) | Budget Total Cost of Activity (excludes HST)(\$) |
|                                                                                                                | С                                                    | EC EXPENSE S                         | STREAM                                          |                        |                      |                                                  |
| 4.<br>Scope of Work:                                                                                           |                                                      |                                      |                                                 |                        |                      |                                                  |
| Total Cost of Activity                                                                                         |                                                      |                                      |                                                 |                        |                      |                                                  |
| Name of Other Source(s) of Funding                                                                             |                                                      |                                      | Total Fu                                        | unding from O          |                      |                                                  |
| Total Requested Funding for Activity 4 under CEC  (Total Cost of Activity – Total Funding from Other Source(s) |                                                      |                                      |                                                 |                        |                      |                                                  |

| WORK PLAN AND BUDGET (excludes HST)                                                                            |                                                      |                                      |                                                 |                                            |                      |                                                  |
|----------------------------------------------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------|-------------------------------------------------|--------------------------------------------|----------------------|--------------------------------------------------|
| Activities to be Completed                                                                                     | Resource<br>Name, Title,<br>Company and<br>Logistics | Total Cost<br>of<br>Resource<br>(\$) | Targeted<br>time<br>Required<br>for<br>Activity | Targeted<br>Start Date                     | Planned<br>Output(s) | Budget Total Cost of Activity (excludes HST)(\$) |
|                                                                                                                | С                                                    | EC EXPENSE S                         | STREAM                                          |                                            |                      |                                                  |
| 5.<br>Scope of Work:                                                                                           |                                                      |                                      |                                                 |                                            |                      |                                                  |
|                                                                                                                |                                                      |                                      |                                                 | Tota                                       | I Cost of Activity   |                                                  |
| Name of Other Source(s) of Funding                                                                             |                                                      |                                      | Total Fu                                        | Funding from Other Source(s) if applicable |                      |                                                  |
| Total Requested Funding for Activity 5 under CEC  (Total Cost of Activity – Total Funding from Other Source(s) |                                                      |                                      |                                                 |                                            |                      |                                                  |

#### **WORK PLAN AND BUDGET (excludes HST)**

#### **TOTALS**

### Please add these total amounts to the CEC Application form under "Work Plan and Budget" Table.

| Total Cost for all Activities                                                                                                                                                                        |  |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Please add this Total on the CEC Application form under Work Plan and Budget table to "Total Requested Funding for all Activities under CEC"                                                         |  |
| Total Funding from Other Source(s) for all Activities  Please add this Total on the CEC Application form under Work Plan and Budget table to "Total Funding from Other Source(s) for all Activities" |  |
| Total Requested Funding for all Activities under CEC (Total Cost of Activities – Total Funding from Other Source(s)                                                                                  |  |
| Please add this Total on the CEC Application form under Work Plan and Budget table to "Total Requested Funding for all Activities under CEC"                                                         |  |