

# **COVID-19 TOURISM RESPONSE FUND**

The Federal Economic Development Agency for Southern Ontario (FedDev) Ontario delivers programs and services to support innovation and economic growth in Southern Ontario under the direction of the Federal Ministry of Economic Development and Official Languages.

FedDev recognizes the significant decline in tourism activity for many tourism dependent communities as a result of the COVID-19 pandemic and wishes to help offset the high costs incurred by tourism-oriented businesses and organizations.

The COVID-19 Tourism Response Fund — generously provided by FedDev — provides \$250,000 to Bruce County tourism-related businesses in the form of a one-time, non-repayable grant of \$2,500-\$10,000\*.

\*Applicants need to have a matching contribution of 20%.

#### Applications accepted October 1 - October 16, 2020.

Tourism Operators as defined by and according to Tourism HR Canada includes: Accommodation (hotels, motels, resorts, campgrounds, and recreational vehicle facilities), Recreation and Entertainment (zoos, museums, theatres, sports facilities, amusement parks, government parks, heritage sites, hunting, fishing or outdoor adventure outfitters, and casinos), Food and beverage services (restaurants from fast service to fine dining, as well as pubs, nightclubs, cruise ships, and convention centres); Travel services (retail travel agencies, wholesale tour companies, or corporate offices with their own booking divisions) and Transportation (companies that provide transport by air, land or water, and include airlines, bus companies, taxi companies, ferry services, and cruise ships). Retail stores heavily dependent on tourism may also be considered.

#### **EXAMPLES OF ELIGIBLE COSTS INCLUDE:**

- implementation of health and safety protocols
- alterations to accommodate social distancing including expansion of patio space for restaurants (including tables, chairs, umbrellas) and/or acquisition of equipment like outdoor heaters to extend seasons
- the purchase of large scale PPE or sanitizing equipment (fog machines)
- cleaning supplies for workers/customers
- the acquisition and implementation of digital tools and operating transformations like virtual queue, timed entry ticketing or contactless check-ins

### **APPLY TO RELEVANT CFDC:**



**Bruce Community Futures Development Corporation** 

Barb Fisher, General Manager bfisher@bruce.on.ca 519-386-9933 or Toll Free: 888-832-2232



Saugeen Economic
Development Corporation

Rose Austin, General Manager rose@sbdc.ca 519-799-5750 ext. 1 or Toll Free: 877-335-7332







# COVID-19 TOURISM RESPONSE FUND APPLICATION

### **ELIGIBILITY CRITERIA**

•	ise contact your local D	provided at time of submission, the application will bevelopment Corporation for any questions during
<ul> <li>□ Complete application</li> <li>□ Located and operation</li> <li>□ Operating prior to J</li> <li>□ Serving the tourism</li> <li>□ Have less than 25 end</li> </ul> TELL US ABOUT YO	ng in Bruce County anuary 31, 2020 industry as defined mployees	<ul> <li>□ Provide a copy of Master Business License or Incorporation documents</li> <li>□ Provide a copy of income statements</li> <li>□ Provide quote/estimate/invoice of items requested</li> </ul>
Legal business name:		
Business operating nar	ne, if different from above	:
Contact name:		Position:
Email:		Phone number:
Business address:		
Town:	Province:	Postal code:
Business operating add	Tress, if different from abo	ve*



Town:



Postal code:

Province:





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ls yo	our business locate	d in a dow	ntown core?		□ Yes	1		No	
Busi	iness structure:								
	Sole proprietorship	<b>D</b>	Partnership		Corporatio	n			
CRA	business number:								
Wha	at month and year v	was your b	usiness registe	ered and	fully operat	tional?			
	P US UNDERSTA								
yea	at is the approxima r (Jan 1, 2019 - Aug ease attach income	g 31, 2019	compared to J	an 1, 20	020 - Aug 31,			•	9?
	Less than 20%	□ 20	- 50%		50 - 90%			More than 90%	, )
How	v many employees o	did you hav	e at this same	e time la	ast year (or p	ore-COVID	))?		
How	many employees o	do you hav	e now?						
Are	your current emplo	oyees work	ing modified h	nours, jo	bb-sharing, e	etc.?			
Hav	e you used any oth	er COVID-1	9 support pro	gram's t	o date?				







### **TELL US ABOUT YOUR PROJECT**

Note: should your project be approved, you will be required to report back on the outcomes of your project, so please be as specific and realistic as possible.

Please describe in as much detail as possible your project and how it supports the tourism	
industry.	
maasa y.	
Please outline your budget for your project. Please include all costs associated with your projec	:t
and attach estimates and quotes to the application. Only those eligible will be considered for	
funding.	
. and many	







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How many employees have/will be hired/recalled/transitioned as a result of this project?
How many employees have/will you maintain/diversify as a result of this project?
The purpose of this project is for longer-term sustainability. How have/will this project support your business in 2021 & beyond?
COVID-19 has created ongoing public health and safety concerns. Please describe how this project has/will mitigate risk associated with a future outbreak or new changes to public gatherings?









### SELF-IDENTIFICATION SURVEY

We encourage you to complete the following self-identification questions. Your responses are **voluntary**, will be kept strictly confidential, and will be used for reporting and statistical purposes only. Should you choose not to self-identify, your application will not be prejudiced in any way.

**INDIGENOUS PEOPLES:** means persons who are Indigenous to Canada, including, First Nations, Inuit or Métis.

**MEMBERS OF VISIBLE MINORITIES:** means persons, other than Indigenous peoples, who are non-Caucasian in race or non-white in colour.

**PERSONS WITH DISABILITIES:** means persons who have a long-term or recurring physical, mental, sensory, psychiatric or learning impairment and includes persons whose functional limitations owing to their impairment have been accommodated in their current job or workplace.

**WOMEN:** means persons that identify as women (female).

Based on the designated group definition, please check any of the following:

I identify as a member of a visible minority.
I identify as an indigenous Person.
I identify as a Person with a Disability.
I identify as female.







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### **SUMMARY**

By che	ecking the boxes below, I acknowledge the following:
	I have submitted a copy of my Master Business License.
	I have submitted copies of relevant income statements.
	I confirm that no other government related programs have been used to pay for this project and that I will not use these expenses toward any other program up to and including those announced on/before March 31, 2021.
	I confirm the information that I have provided here is correct and that I am the owner/operator of the company or have the authority to bind the corporation.
	The project will be completed, and invoices can be submitted by Dec 31. 2020.
busine kind p	ev & Bruce County want to share in your success in receiving this grant. The use of your less name and description of your business may be showcased in media communications of any broduced by or on behalf of FedDev & Bruce County.  By placing your initials in this box, you are GIVING CONSENT to the BCFDC & SEDC to share name and contact information with FedDev & Bruce County for this purpose.
Print	applicant name:
Appli	icant signature:
Date	:





