**Community Resiliency Investment Program**

**2021 FireSmart Economic Recovery Fund**

**Final Report Form**

The Final Report Form is required to be completed for all funded projects.

All questions are required to be answered by typing directly in the form. For detailed instructions regarding final report requirements, please refer to the 2021 FireSmart Economic Recovery Fund Program & Application Guide or contact [cri@ubcm.ca](mailto:cri@ubcm.ca) or (250) 356-2947.

|  |  |
| --- | --- |
| **SECTION 1: Applicant Information** | **CRI-** (*for administrative use only*) |
| Name of Local Government or First Nation: | Date of Final Report: |
| Contact Person\*: | Position: |
| Phone: | Email: |

*\* Contact person must be an authorized representative of the applicant.*

|  |
| --- |
| **SECTION 2: For Regional Projects Only** |
| * + - 1. **Identification of Partnering Communities.** For regional projects only, please list all of the partnering eligible applicants included in this project. Refer to Section 4 in the Program & Application Guide. |

|  |
| --- |
| **SECTION 3: Project Summary** |
| * + - 1. **Name of the Project:** |
| * + - 1. **Actual Project Cost & Grant Request.** As outlined in Section 3 of the Program & Application Guide, all other financial contributions for eligible portions of the project must be declared and may decrease the value of the grant. This includes other grant funding and any revenue (e.g. sale of forest products) that is generated from activities that were funded by the 2021 FireSmart Economic Recovery Fund.   Total Project Cost: $  Other funding or revenue (please describe and indicate amount): $  Total Grant Request: $ |

|  |
| --- |
| **SECTION 4: Project Information** |
| * + - 1. **Summary of Completed Activities.** Please provide a detailed summary of the completed project activities based on the funding categories that were approved in your application. Please note, unless an amendment request was approved by UBCM, the completed activities must align with the proposed activities that were approved in the application and budget. A detailed financial summary based on the approved project budget is also required to be submitted. |
| **A. FireSmart Projects for Residential Areas**  Detailed description of completed activities, limited to labour costs:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used: |
| **B. FireSmart Projects for Farms & Ranches**  Detailed description of completed activities, limited to labour costs:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used: |
| **C. FireSmart Projects for Community Assets**  Detailed description of completed activities, limited to labour and building material costs:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used: |
| **D. FireSmart Projects for Critical Infrastructure**  Detailed description of completed activities, limited to labour and building material costs:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used: |
| **E. Fuel Management Demonstration Projects**  For full final report requirements for demonstration projects, refer to Appendix 4 in the Program & Application Guide.  Detailed description of completed fuel management activities, including description of area and hectares treated:  Detailed description of completed educational activities:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used:  For demonstration project located on Provincial Crown land, provide the Activity Treatment ID as evidence of successful RESULTS entry: |
| **F. Job Creation for Sustained Wildfire Resiliency**  Detailed description of completed activities, including position(s) that was created, job description and tasks that were completed:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used: |
| **G. Skills Development that Leads to Employment**  Detailed description of completed activities, including specific training that was provided and description of who received training:  Actual per person days for this activity, including calculation:  Outcomes and performance measures used: |
| * + - 1. **Total per person days per project.** Please include the actual per person days for the overall project. |
| * + - 1. **Outcomes.** |
| **A. Capacity Building.** How did the completed activities lead to increased capacity in your community? This could include increased employability of local populations, improved capacity for future wildfire risk reduction, etc. |
| **B. Wildfire Resiliency.** How did the completed activities increase community wildfire resiliency? |
| **C. Recovery from Economic Impacts of COVID-19 Pandemic.** How did the completed activities support economic recovery? |
| * + - 1. **Partnerships & Collaboration.** Please identify any other authorities you collaborated with on the project (e.g. community, resident or Indigenous organizations or other First Nations or local governments) and summarize that collaboration**:** |
| * + - 1. **Additional Information.** Please share any additional comments you would like to provide: |

|  |
| --- |
| **SECTION 5: Final Report Check List** |
| Final Report Form |
| Financial Summary |
| Copies of any training or capacity building materials that were produced with grant funding |
| Fuel Management Demonstration Projects only (refer to Appendix 4 in the Program & Application Guide for full requirements):   * Copy of the signed prescription and PDF maps (if not submitted in the interim report) * Post-treatment report and PDF maps |
| Optional: Photos or media related to the project |

|  |  |
| --- | --- |
| **SECTION 6: Signature & Certification (to be signed by Chief Financial Officer)** | |
| I certify that the costs stated in the required Financial Summary: (1) have been incurred and paid; (2) are attributable to the project; (3) are eligible (as outlined in the Program & Application Guide); and (4) are net of tax rebates and any other rebates.  In addition, for final claims, I certify that: (1) the project is complete; (2) all revenues generated from the project have been declared; and (3) all eligible portions of all other grant contributions for the projects have been declared. | |
| Name: | Title: |
| Signature: | Date: |