

Nova Scotia - Transit Research Incentive Program (NS - TRIP)

2024-25 Program Application

Applicant Information

Community Group/Organization:	
Project Name:	
Contact Name:	
Title:	
Telephone:	
Email:	
Mailing Address:	
Total NS-TRIP Requested \$	
Please select from the following to identify the project composion. Select all that apply:	onent/category you are seeking funding
Feasibility Study/Needs Assessment*	Pilot Project
Business Plan Development*	Service Start-Up
Pre-Pilot Implementation	Research Project *
* Please note that Feasibility Studies/Needs Assessments, Busin	ness Plan Development and

^{*} Please note that Feasibility Studies/Needs Assessments, Business Plan Development and Research Projects must be completed and submitted to the Department of Public Works **by February 14th, 2025**.

^{**} See NSTRIP Guidelines for the available program funding for each of the project categories



Project Funding

Project #1 – Feasibility Study/Business Plan

Sources of Funding	Identify Funding	Amount (\$) Yes		_	
	Source			No	
NS-TRIP	NS-TRIP	Financial			
Applicant's Contribution		Financial			
		In Kind Services			
Other (identify source)		Financial			
		In Kind Services			
Total Project Cost					

Project #2

Sources of Funding	Identify Funding	Amount (\$) Yes			_
	Source			No	
NS-TRIP	NS-TRIP	Financial			
Applicant's Contribution		Financial			
		In Kind Services			
Other (identify source)		Financial			
		In Kind Services			
Total Project Cost					



Applications for funding will only be considered if all the sections below are completed.		
Description of organization.		
Provide project overview including goals, objectives, and outcomes.		



Describe area/community(s) to be serviced (identify if there are any current public transit services in	this
area) including the population.	
Outline proposed monthly schedule and timelines for completion of the project.	



Provide detailed project budget (or attach to application).
dentify who is anticipated to conduct the study/project and, if available, outline experience (attach
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Declaration

The information provided on this application form and accompanying documentation is accurate to the best of my knowledge. I confirm that the project will commence after April 1st, 2024 and will be completed by February 14th, 2025.

I hereby give the **Department of Public Works** authority to verify any and all information pertaining to this application.

I understand that any projects funded may be subject to an audit by the Province of Nova Scotia. The Province reserves the right to review and inspect funded projects and related documentation during and following project completion.

Signature	Date

Please forward your application by email to:

Greg Sewell,
Director, Community Transportation
Department of Public Works
(902) 719-7673
gregory.sewell@novascotia.ca