

**THE CORPORATION
OF THE
TOWN OF NIAGARA-ON-THE-LAKE
BY-LAW NO. 5213-20**

A BY-LAW TO AUTHORIZE THE LORD MAYOR AND TOWN CLERK TO SIGN ANY AND ALL NECESSARY DOCUMENTS PERTAINING TO THE GRANT AGREEMENT BETWEEN THE CORPORATION OF THE TOWN OF NIAGARA-ON-THE-LAKE AND EMPLOYMENT AND SOCIAL DEVELOPMENT CANADA (FLOOR CURLING PROGRAM)

BE IT ENACTED AS A BY-LAW OF THE CORPORATION OF THE TOWN OF NIAGARA-ON-THE-LAKE as follows:

1. THAT the Lord Mayor and Town Clerk are hereby authorized to execute any and all documents pertaining to the Grant Agreement between The Corporation of the Town of Niagara-on-the-Lake and Employment and Social Development Canada; and
2. THAT the Lord Mayor and Clerk be authorized to affix their hands and the Corporate Seal; and
3. THAT this by-law shall come into force and take effect immediately upon the passing thereof.

READ A FIRST, SECOND AND THIRD TIME AND PASSED THIS 24th DAY OF FEBRUARY 2020

LORD MAYOR BETTY DISERO

DEPUTY CLERK COLLEEN HUTT



Grants and Contributions Direct Deposit Request Form

Action Requested

- Direct Deposit Registration / Renewal
- Changes to Direct Deposit Information
- Cancellation of Direct Deposit

General Information

Organization Legal Name		Contact Person	
E-mail Address (for direct deposit notification)		(Area code) Telephone Number	Extension
Street Address, Office Number, R.R., or P.O. Box			
City, Town		Province/Territory	Postal Code

Request applies to the following project(s):

Project Number	Program Name	Project Location

Privacy Notice:

The information you provide on this form is collected by Employment and Social Development Canada (ESDC) under the authority of the *Department of Employment and Social Development Canada Act (DESDC Act)* to effect and administer direct deposit payments for grants and contributions. ESDC will monitor the initial deposits and may cross reference with other funded programs for verification purposes of the banking information. Participation is voluntary. However refusal to provide this information will result in not receiving payments through the direct deposit system.

Your personal information will be retained in Personal Information Bank: ESDC PPU 298 and administered in accordance with the *DHRSD Act*, and the *Privacy Act*. You have the right to the protection of, and access to, your personal information. Instructions for obtaining this information are outlined in the government publication entitled Info Source, which is available at the following web site address: infosource.gc.ca. Info Source may also be accessed on-line at any Service Canada Centre.

Authorization

I, undersigned, am legally entitled to sign the agreement on behalf of the organization and confirm that the information included in this form is accurate and complete. I/we authorize ESDC to deposit, in the account indicated in this form, all payments in accordance with the terms and conditions of the agreements concluded with ESDC for the indicated project(s). I/we authorize ESDC and Public Services and Procurement Canada (PSPC) to proceed with the verification of this account by the deposit of an amount of \$5.00 of the project funds and I agree to confirm, upon request by ESDC, that the deposit has been done in the right account. I understand that this Due Diligence procedure **is mandatory**. I/we also authorize ESDC to monitor initial deposits and cross reference with other funded programs for verification purposes of the banking information.

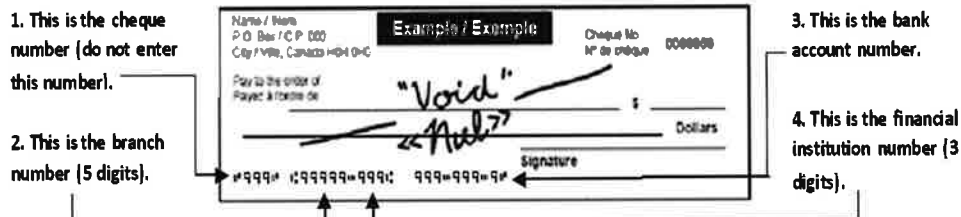
Printed Name _____ Signature _____ Date (yyyy-mm-dd) _____

Printed Name _____ Signature _____ Date (yyyy-mm-dd) _____

Printed Name _____ Signature _____ Date (yyyy-mm-dd) _____

Financial Information

A blank 'VOID' cheque must be included with the form.



If you are **not** submitting a voided cheque, have your financial institution complete the following information.

Branch Number

Institution Number

Account Number

Name(s) of account holder(s)

Financial Institution Stamp

***** ESDC is not responsible for the problems which could arise if the provided information is inaccurate or incomplete. The department can refuse a request for registration.**



SIGNING OFFICERS FORM GRANT AGREEMENT

Name of organization: _____ Effective date: _____

NOTICE TO SIGNATORIES

The information provided is collected under the authority of the *Department of Employment and Social Development Act*. The information in this Signing Officers Form will be used and may be disclosed for the purposes of validating the identity of individuals within the applicant organization having the authority to approve payments, to sign agreements, claims and reports. Signatories to this form may be asked to provide additional information and/or documentation confirming their respective identities and roles within the recipient organization.

Completion of this form is voluntary; however, refusal to provide information will result in the applicant not being considered for funding.

The information provided may be shared with external consultants, review committee members, officials in other departments, federal, provincial and/or territorial governments or Members of Parliament for the purpose of review and verification.

The information provided may be used and/or disclosed for policy analysis, research and/or evaluation purposes. In order to conduct these activities, various sources of information under the custody and control of Employment and Social Development Canada (ESDC) may be linked. However, these additional uses and/or disclosures of personal information will never result in an administrative decision being made about an individual.

Personal information gathered in this form and/or made available to ESDC for further identification purposes, will be administered in accordance with the *Privacy Act* and the provisions governing the protection of personal information that are set out in the *Department of Employment and Social Development Act*, as applicable. The *Privacy Act* provides every person with a right to the protection of, and access to their personal information, which is described in Personal Information Bank(s) ESDC PPU 298. Instructions for obtaining this information are outlined in the government publication entitled *Info Source*, which is available at the following web site address: <http://www.infosource.gc.ca>. *Info Source* may also be accessed on-line at any Service Canada Centre.

CERTIFICATION

The Persons providing a specimen signature within this form, in so signing certify as follows:

- a) that I am the person with the name indicated alongside my specimen signature;
- b) that I will make available to Employment and Social Development Canada, upon their request, the necessary documentation for the purposes of further identification; and,
- c) that I hold the title listed below and, in this capacity, am authorized to sign on behalf of the applicant organization in accordance with the organization's incorporating documents, by-laws, or other relevant documents.

Section 1: Signing Officers for Agreement Purposes (According to Letters, Patents or Other Incorporating Documents)

Please provide the name, title and specimen signature of the person(s) authorized to sign.

Title	Name	Specimen Signature

How many of the above signatures are require to bind your organization onto a legal agreement?

Section 2: Signing Officers for payment purposes on behalf of your organization.

Please provide the name, title and specimen signature of the person(s) authorized to sign.

Title	Name	Specimen Signature

How many signatures are required to authorize a payment on behalf of your organization?

Section 3: Signing Officer for Reports submitted to ESDC.

Please provide the name, title and specimen signature of the person(s) authorized to sign.

Title	Name	Specimen Signature

How many signatures are required to sign a report submitted to ESDC?

- ❖ Please note that it is the organization's responsibility to provide an updated Signing Officers Form to the Department if changes occur.