ATLANTIC INNOVATION FUND

INSTRUCTIONS TO PROPONENT

ADVANCE PAYMENTS

- Requests may be submitted to ACOA for costs expected to be incurred in the near future (not to exceed 3 months). Disbursements will be based on a cash flow forecast showing expenditure items which normally require funds in advance. Please read your contract carefully to determine exactly what costs are considered eligible costs.
- 2. When requesting an advance, please use the form "Request for an Advance Payment" which is attached.
- 3. When showing the cost of an eligible item, include the estimated HST or GST & Provincial Sales Tax, freight and delivery costs.
- 4. After completing the top portion of the schedule, please list individually all costs to be incurred. All columns of the schedule <u>must</u> be completed.
- 5. Do not submit supporting documents. However, purchase orders, cancelled cheques, invoices, receipts and all other supporting documentation must be retained and readily available for an examination in the event of an audit.
- 6. It is essential that the covenant at the bottom of the claim form has been duly signed and dated.
- 7. Within **forty-five** (**45**) days of the end of the period covered by the advance payment request, or upon request from the Agency, you will be expected to submit a claim detailing costs incurred and amounts paid to suppliers.
- 8. You will be expected to maintain sufficient records to enable you to provide that information with your next claim.
- 9. If you require any further information or need assistance in completing your claim, please do not hesitate to call your Account Manager.

ATLANTIC INNOVATION FUND REQUEST FOR AN ADVANCE PAYMENT

Proponent Name:	Contract No.		
Address:	Contact Name:		
Is this a New Address: Yes □ No □	Telephone No: Fax No: Email Address:		
	Period Covered:		
	From: To:		
PLEASE REFER TO INSTRUCTIONS ON THE REVERSE			

Forecasted Cash Requirements

Major Activity	Description of Eligible Cost Item	Amount Month 1	Amount Month 2	Amount Month 3	Total Amount
	Total				

I hereby certify that the above noted costs are eligible costs of the project, and that the forecasted amounts are accurate and complete. I confirm that the requested funds are required to enable the project to be satisfactorily completed and I agree that any contribution provided as a result of this claim will be applied directly and only to the eligible costs of the project.

Proponent Signature:_____

Date:_____