



# All Risk Municipal Grant

Investing in Municipal Risk Resiliency

**LAS**

**[intact]** public  
entities

## Application

Name of Municipality: \_\_\_\_\_

Name of Municipal Submitter: \_\_\_\_\_ Title: \_\_\_\_\_

Department of Municipal Submitter: \_\_\_\_\_

Email Address: \_\_\_\_\_ Phone Number: \_\_\_\_\_

### Application Questions

#### 1. Describe the Risk Issue:

Provide a clear and detailed explanation of the specific risk the municipality is addressing.

- Why does the municipality want to solve this specific risk issue? What are the primary goals and objectives of this initiative?

#### 2. Describe the Proposed Solution:

Outline the risk management solution, including its key features and how it addresses the identified risk.



# All Risk Municipal Grant

Investing in Municipal Risk Resiliency

**LAS**

**[intact]**

public  
entities

### 3. Explain the Significance of the Solution:

Highlight why this solution is important for your municipality and community and the impact it will have.

### 4. Cost/Benefit Analysis:

- Detail the total cost of the solution.
- Explain how the benefits of this initiative outweigh the costs.



# All Risk Municipal Grant

## Investing in Municipal Risk Resiliency

**LAS**

**[intact]**

public  
entities

### 5. How Will the \$10,000 Grant Be Used:

Provide a breakdown of how the grant funds will be allocated to implement your solution. Please include a timeline and budget for the overall project.

- What impact would the implementation of this solution have on your overall risk profile? What impact would it have on your risk and claims program?
- How could your proposed solution aid other municipalities?

### 6. Attach Supporting Documents (if applicable):

- Include relevant materials, such as copies of policies, procedures, inspection forms, pictures or other documentation that supports your application.

**Please ensure the submission is complete and provides a clear explanation of the risk management initiative. Once the entry is submitted, we will not be reaching out for additional information.**

**The applicant understands that this submission does not guarantee funding.**

Signature of Municipal Submitter: \_\_\_\_\_ Date: \_\_\_\_\_

By signing this form, I, \_\_\_\_\_, grant Local Authority Services (LAS) and Intact Public Entities (IPE) permission to publicize our submission if selected as a successful grant recipient.

By submitting this application, the applicant certifies that they have read, understood, and agreed to the rules and guidelines.

**Submit your completed application to the email address: [MunicipalRiskGrant@las.on.ca](mailto:MunicipalRiskGrant@las.on.ca)**

**Applications must be submitted by 4:00 PM on Friday, May 1, 2026.**