

## Non profit Community Grant Program to Assist with the Treatment and Prevention of Bed Bugs

The purpose of the grant is to provide for community based non profit organizations with bed bug education, treatment/management and prevention. Large public institutions such as schools, prisons and hospitals, as well as private businesses are not eligible for the community grant program.

Qualifying organizations that are eligible may receive grants from 50 to 100% of costs associated for treatment and prevention of bed bugs to a maximum of \$2,000.00 per applicant.

*Please see program guidelines for additional information.*

Name of Organization: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Full Address of Organization: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Full Mailing Address (If Different from Above): \_\_\_\_\_

Website: \_\_\_\_\_

How much funding is your organization seeking? \_\_\_\_\_

Does your organization qualify as a non-profit organization as defined by the Canada Revenue Agency<sup>1</sup>:  Yes or  No

Identify and briefly describe programs and/or services that your organization provides: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Who is your target population that is served by your organization? <sup>2</sup> \_\_\_\_\_

How does your organization plan to use the grant?

- 1. Treatment (i.e. cost sharing extermination fees)
- 2. Prevention (i.e. mattress covers, washer and dryers, etc.)
- 3. Other (Please specify)

Has your organization had an infestation of bed bugs in the past? If so, how did you treat the problem? \_\_\_\_\_

\_\_\_\_\_

Does your organization have a plan to educate staff and participants about bed bugs, and ways to prevent an infestation?

\_\_\_\_\_

Describe your post-prevention plan for after you receive treatment services and/or assistance to prevent the occurrence or re-occurrence of bed bugs.<sup>3</sup> \_\_\_\_\_

\_\_\_\_\_

Has your organization received any funding from municipal, provincial or federal programs for bed bug treatment or prevention products or services? \_\_\_\_\_

Has your organization received any other funding specifically for the treatment or prevention of bed bugs?

If yes, what organization provided the funding? \_\_\_\_\_

**The following questions are for organizations that selected treatment option only** <sup>4</sup>

**Required:** Please attach a copy of a qualified exterminator's estimate of treatment.<sup>5</sup>

Do you currently have a bed bug infestation?  Yes?  No?

Have you reviewed information on the Manitoba Government website about information regarding unit preparation for treatment and choosing an exterminator?  Yes?  No?<sup>6</sup>

**For Organizations that Selected Prevention or Other Only**<sup>7</sup>

Do you currently have or previously had a bed bug infestation?  Yes?  No?

In a single page, please attach a proposal for your prevention initiative and clearly describe how the product or service will help prevent a future infestation in your organization. Please include an estimate of the cost.

---

## Bed Bug Non-profit Treatment and Prevention Grant Guide

1. The Canada Revenue Agency defines a non-profit as:

A non-profit organization is an association, club, or society that is operated exclusively for social welfare, civic improvement, pleasure, recreation, or any other purpose except profit. It is not a charity. No part of the organization's income can be payable to or available for the personal benefit of any proprietor, member, or shareholder, unless the recipient is a club, society, or association whose primary purpose and function is to promote amateur athletics in Canada.

From <http://www.cra-arc.gc.ca/chrts-gvng/chrts/glssry-eng.html>

2. Target population means the subgroups of the population that your organization serves. Such groups can include: the elderly, youth, persons with disabilities, families etc.
3. For more information on how your organization can prevent the spread of bed bugs, please visit our website at <http://www.gov.mb.ca/bedbugs/index.html>
4. This section is only for applicants intending to hire a certified professional in pest management to conduct treatment or surveillance for bed bugs.
5. An estimate from a certified professional in pest management is required. Many companies provide free estimates on the amount.
6. For further information, please visit [http://www.gov.mb.ca/asset\\_library/en/bedbugs/bed\\_bugs\\_fact\\_sheet.pdf](http://www.gov.mb.ca/asset_library/en/bedbugs/bed_bugs_fact_sheet.pdf)
7. This section is only for applicants intending on receiving a grant for prevention and management products and services only, which does not include treatment or surveillance from a certified pest management professional. You may also be asked to show proof of purchase at a later date.

*Please return your completed application by mail, fax or e-mail to:*

Manitoba Healthy Living, Youth and Seniors  
Bed Bug Grant Program  
2nd Floor - 300 Carlton Street  
Winnipeg, MB. R3B 3M9  
Fax: (204) 948-2366  
E-mail : [bedbugs@gov.mb.ca](mailto:bedbugs@gov.mb.ca)

If you have any questions or require further information please call 1-855-3MB-BUGS (1-855-362-2847) or email [bedbugs@gov.mb.ca](mailto:bedbugs@gov.mb.ca)





## Payment

Please indicate the name of the organization the cheque should be made payable to if your application is approved. Cheques must be made out to an organization and not to an individual.

If application is approved make cheque payable to:

---

Cheques will be written to the specified organization using the exact spelling you have indicated. Copies of receipts/and or proof of purchase for all expenses must be received prior to payment.

## Signatures

By signing below, I state that all information included within this grant application is, to the best of my knowledge accurate.

---

Applicant (print name)

Title

---

Signature

Date

Please fax to: (204) 948-2366 or e-mail to [bedbugs@gov.mb.ca](mailto:bedbugs@gov.mb.ca), thank you