

Agence de promotion économique du Canada atlantique



ADVANCE PAYMENT REQUEST

INSTRUCTIONS

1. General

- 1.1 You may request an advance only if your Contribution Agreement contains an article allowing advances.
- 1.2 In order to obtain an advance, you must complete the Advance Payment Request form. Depending on your situation, you may need to complete the Declaration of Overdue Amounts Owed to the Crown form.
- 1.3 If your Advance Payment Request form is incomplete, it will result in delays and may be returned to you without being processed. You may contact your Program Officer if you have any questions regarding your Contribution Agreement, the advance process or if you need assistance in completing the form(s).
- **1.4** If there are pre-disbursement conditions in your Contribution Agreement, please submit proof that they have been met when submitting your first Advance Payment Request.
- Your Advance Payment Request must be submitted for costs expected to be incurred in the near future no more than the next three (3) months. These costs are detailed in your Contribution Agreement, more specifically in the Statement of Work.
- **1.6** To submit your request electronically, use ACOA Direct. To register, please contact your Program Officer.

FORMS

2. Advance Payment Request

- **2.1** Please provide details of your forecasted requirements for project funds.
- Please group costs to be incurred according to the Eligible Project Costs listed in the Statement of Work (for example, all costs relating to Equipment should be grouped together).
- 2.3 Please note that the Agency will not advance funds for the HST/GST that you are eligible to receive as an Input Tax Credit from the Canada Revenue Agency. Please exclude HST/GST from your Advance Payment Request.
- A person authorized to sign on behalf of the recipient must sign and date the certification section. If you are submitting your request through ACOA Direct, it should be submitted by a properly authorized individual.
- Providing misleading or incorrect information constitutes an event of default pursuant to your Contribution Agreement. In such a case, the Agency, pursuant to the Agreement, has the right to suspend or terminate any obligations to contribute to the eligible costs and/or to demand the immediate and full repayment of its contribution.
- Your advance must be substantiated, to the satisfaction of the Agency, within forty-five (45) calendar days of the end of your advance period. Substantiation must be in the form of a Claim for a Progress or Final Payment detailing costs incurred and amounts paid by the Recipient to the suppliers and/or employees. Further advances will not be processed until you have substantiated all the funds previously advanced.

3. Declaration of Overdue Amounts Owed to the Crown

3.1. You must complete this form when you have any overdue amounts owed to the Crown. Please describe the nature of the amount(s) and the name(s) of the department(s) to which each amount is overdue.



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| ADVANCE PAYMENT REQUEST | | | | | | | | | | |
|--|---|--|--|--------------------|---|---------------------------------|-------------------------------|---------------------------------|-------------------------------|---------|
| RECIPIENT NAME: | | PROJECT NUMBER: | | | | PAGE: | OF | | | |
| CONTACT NAME: | | PAYMENT NUMBER: | | | | | | | | |
| CONTACT INFORMATION: | HAS YOUR MAILING ADDRESS, EMAIL, TELEPHONE NUMBER CHANGED? (IF YES, PLEASE PROVIDE NEW INFORMATION BELOW) | | YES NO | | PERIOD COVERED: (MAXIMUM 3 MONTHS) | | FROM: | | | |
| | , | | | То: | | | | | | |
| I HEREBY CERTIFY THAT: | | | | | | | | | YES | 5 NO |
| The Recipient has overdue amounts owed to the Crown (e.g. remittances for employee deductions, HST/GST, income tax) (If Yes, submit the Declaration of Overdue Amounts Owed to the Crown form) | | | | | | | | | | |
| FORECASTED REQUIREMENTS | | | | | | | | | | |
| CATEGORY PER ELIGIBLE CO (GROUP COSTS AS LISTED IN TI STATEMENT OF WORK) | | PAYABLE TO (NAME OF SUPPLIER/EMPLOYEE) | | | AMOUNT MONTH 1 (NET OF HST/GST) | AMOUNT MONTH 2 (NET OF HST/GST) | | AMOUNT MONTH 3 (NET OF HST/GST) | TOTAL AMOUNT (NET OF HST/GST) | |
| | | | | \$ | | \$ | | \$ | \$ | |
| | | | | \$ | | \$ | | \$ | \$ | |
| | | | | \$ | | \$ | | \$ | \$ | |
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| | | | | \$ | | \$ | | \$ | \$ | |
| | | | | \$ | | \$ | | \$ | \$ | |
| | | | | \$ | | \$ | | \$ | \$ | |
| | TOTAL | | | \$ | | \$ | \$ | | | |
| same force and effect as if monies received as a resul | pove-noted costs are eligible project co made under oath and by virtue of the t of this advance will be applied directly 45) calendar days of the end of the per | Canada Evidence Act. I con and only to the eligible proiod covered by this advance | firm that the re oject costs. I als e. | quested o agree | funds are require to substantiate th | d to ena | ble the project Advance by | ct to be completed and | I agree tl | nat any |
| | PERSO | N AUTHORIZED TO | | | FOF THE RE | CIPIE | :N i | | | |
| Signature: | | | Date | | | | | | | |
| Print Name and Title: | | | | | | | | | | |

Ce formulaire est dispondible en français.

Revised: February 2025.