|  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of eligible corporation | | | | | | | | | | | |
| Date of issue of the eligibility certificate | | | | | | | | | | | |
| Period from x to x | | | | | | | | | | | |
| Name of 1st project | | | | | | | | | | | |
| Establishments in which the project is carried out: address, postal code | | | | | | | | | | | |
|  | Projected costs on certification  (1) | Capitalized costs\* during the period  (2) | Capitalized costs before the period  (3) | Projected end-of-project costs  (4) | | | Adjusted total costs  (5) | | Remarks (changes, overruns, delays, etc.)  (6) | |
| Component 1 |  |  |  |  | | |  | |  | |
| Component 2 |  |  |  |  | | |  | |  | |
| Component 3 |  |  |  |  | | |  | |  | |
| Component 4 |  |  |  |  | | |  | |  | |
| Component 5 |  |  |  |  | | |  | |  | |
| Component 6 |  |  |  |  | | |  | |  | |
| Other (specify): |  |  |  |  | | |  | |  | |
| **TOTAL** |  |  |  |  | | |  | |  | |
|  | | | | | |  | |  | |  | |
| \* Costs, excluding non‑depreciable costs, that are not expensed in the period in which they were committed, but are added to the business’s balance sheet. | | | | | |  | |  | |  | |
| NOTES: Column 5 = Column 2 + Column 3 + Column 4  Column 2 must be audited by an external accountant.  Validate the addition of these amounts, since any discrepancies will require explanation.   If this is the first time the Investment Project Tracker is filed, column 3 must be blank. | | | | | |  | | Signature of applicant’s authorized representative as indicated in section 2 of the eligibility form | |  | |
|  | | | | | |  | |  | |  | |
| The Ministère des Finances reserves the right to require that supporting documents be provided with respect to the Investment Project Tracker. | | | | | |  | |  | |  | |
|  | | | | |  |  | | Date | |  | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of 2nd project | | | | | | | | | | |
| Establishments in which the project is carried out: address, postal code | | | | | | | | | | |
|  | Projected costs on certification  (1) | Capitalized costs\* during the period  (2) | Capitalized costs before the period  (3) | Projected end-of-project costs  (4) | | Adjusted total costs  (5) | | Remarks (changes, overruns, delays, etc.)  (6) | |
| Component 1 |  |  |  |  | |  | |  | |
| Component 2 |  |  |  |  | |  | |  | |
| Component 3 |  |  |  |  | |  | |  | |
| Component 4 |  |  |  |  | |  | |  | |
| Component 5 |  |  |  |  | |  | |  | |
| Component 6 |  |  |  |  | |  | |  | |
| Other (specify): |  |  |  |  | |  | |  | |
| **TOTAL** |  |  |  |  | |  | |  | |
|  | | | | | |  |  | |  | |
| \* Costs, excluding non‑depreciable costs, that are not expensed in the period in which they were committed, but that are added to the business’s balance sheet. | | | | | |  |  | |  | |
| NOTES: Column 5 = Column 2 + Column 3 + Column 4  Column 2 must be audited by an external accountant.  Validate the addition of these amounts, since any discrepancies will require explanation.   If this is the first time the Investment Project Tracker is filed, column 3 must be blank. | | | | | |  | Signature of applicant’s authorized representative as indicated in section 2 of the eligibility form | |  | |
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|  | | | | |  |  | Date | |  | |

|  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Name of 3rd project | | | | | | | | | | |
| Establishments in which the project is carried out: address, postal code | | | | | | | | | | |
|  | Projected costs on certification  (1) | Capitalized costs\* during the period  (2) | Capitalized costs before the period  (3) | Projected end-of-project costs  (4) | | Adjusted total costs  (5) | | Remarks (changes, overruns, delays, etc.)  (6) | |
| Component 1 |  |  |  |  | |  | |  | |
| Component 2 |  |  |  |  | |  | |  | |
| Component 3 |  |  |  |  | |  | |  | |
| Component 4 |  |  |  |  | |  | |  | |
| Component 5 |  |  |  |  | |  | |  | |
| Component 6 |  |  |  |  | |  | |  | |
| Other (specify): |  |  |  |  | |  | |  | |
| **TOTAL** |  |  |  |  | |  | |  | |
|  | | | | | |  |  | |  | |
| \* Costs, excluding non‑depreciable costs, that are not expensed in the period in which they were committed, but that are added to the business’s balance sheet. | | | | | |  |  | |  | |
| NOTES: Column 5 = Column 2 + Column 3 + Column 4  Column 2 must be audited by an external accountant.  Validate the addition of these amounts, since any discrepancies will require explanation.   If this is the first time the Investment Project Tracker is filed, column 3 must be blank. | | | | | |  | Signature of applicant’s authorized representative as indicated in section 2 of the eligibility form | |  | |
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| The Ministère des Finances reserves the right to require that supporting documents be provided with respect to the Investment Project Tracker. | | | | | |  |  | |  | |
|  | | | | |  |  | Date | |  | |