



# Advance your Asset Management Practices

**NEW! Extended Call for Expressions of Interest Form**

**DEADLINE: The Expressions of Interest intake will remain open while space and funding is available.**

**Apply for your spot today!**

Please read the Program Guide, then complete and return this fillable form.

Email your completed form and supporting documents to:

Wally Wells, Executive Director, Asset Management BC

Phone: 250-741-9887

Email: [info@assetmanagementbc.ca](mailto:info@assetmanagementbc.ca)

Thank you for your interest in advancing your asset management practices!

## SECTION 1: Contact Information

Local Government: \_\_\_\_\_ Email: \_\_\_\_\_

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

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

## SECTION 2: Asset Management Experience

**1. Have you completed a formal self-assessment of your organization's asset management maturity/readiness or some form of gap analysis?**

Yes  No

**If yes, when was the most recent assessment done? \_\_\_\_\_ (year)**

**2. If yes, which maturity/readiness assessment tool was used?**

A. AMBC AssetSMART  Yes

B. FCM Asset Management Readiness Scale  Yes

C. AMBC Roadmap  Yes

D. NAMS  Yes

E. Other (please specify)  Yes

**3. How would you assess your organization's current level of asset management?**

Beginner     Intermediate     Advanced

**4. Which option are you interested in? You may select more than one.**

A. Inspiring Presentation for your Council or Board  Yes



B. Working with your Levels of Service: Technical Assistance  Yes



C. Operationalizing Asset Management: Technical Assistance  Yes



**5. The following information will be helpful for evaluation and selection of participants:**

a) What are some of the **challenges** you are having when it comes to advancing your asset management practices?

b) What are some of the **successes** you've had when it comes to advancing your asset management practices?

**6. A key outcome for this program is to develop case studies for the benefit of other local governments. Are you willing to share your experience and/or information in a case study in the future?**

Yes     No     Decide later

**7. Additional Information**

Please share any other information you think may help support your Expression of Interest. Feel free to provide any links or attach any supporting documents.

**SECTION 3: Attachments**

**Please submit the following with your application:**

Copy of your most recent Asset Management maturity/readiness assessment if available (See Question 2).

**SECTION 4: Signature**

Expressions of Interest must be signed by an authorized representative of the organization. Please note that information in this form and supporting materials may be shared with the program funders: UBCM, FCM and Province of BC.

Name:	Title:
Signature:	Date:

Thank you!



This initiative is offered through the Municipal Asset Management Program, which is delivered by the Federation of Canadian Municipalities and funded by the Government of Canada.  
Municipal Asset Management Program (MAMP) EN: [fcm.ca/assetmanagementprogram](http://fcm.ca/assetmanagementprogram)