



APPLICATION FOR A COMMUNITY SUSTAINABILITY GRANT

Office Use Only
Records Department

File No:

Document No:

COMPLETE THIS FORM USING THE COMMUNITY GRANTS AND SPONSORSHIPS GUIDELINES DOCUMENT

APPLICANT DETAILS

Name of Organisation: _____

Postal Address: _____

Contact Name: _____

Phone Business Hours: _____ Phone After Hours: _____ Mobile: _____

Email: _____

ABN: _____

1. What is the role of your group?

Provide brief details: _____

2. Does your group/organisation prepare an annual financial statement?

Yes No

If YES: Please provide a copy of the financial Statement for the last financial year.

3. If your organisation is not incorporated

Please name the incorporated association that will receive and administer the grant on your behalf, attach a letter from that association to confirm this arrangement, please record their details in the EFT section on page 8.

Name: _____ ABN: _____

4. Is your organisation registered for GST?

Yes No

If YES a Tax Invoice will be required for payment of the granted amount, if successful.

Description of project (please answer all questions you believe to be applicable. Refer to the Grants and Sponsorship guidelines if you have any questions as to the relevance)

1. Project

Title: _____

Project start date: _____ Project completion date: _____

Location of Project: _____

2. Please provide a brief description of your project

3. Please describe how your project will improve or protect the natural environment of your community.

4. Have you acquired all necessary permits and/or approvals for the proposed project?

No Yes Not Applicable

If YES: Please provide details and copies of all permits and approvals obtained. Also provide details of any outstanding permits/approvals.

5. Have you prepared appropriate site plans/construction drawings for the project?

No Yes Not Applicable

If YES: Please provide a copy of the project plan, including details of any risk assessment undertaken and actions proposed to mitigate identified risks.

6. Have you prepared a project plan which identifies possible risks and how these will be addressed?

No Yes Not Applicable

If YES: Please provide a copy of the project plan, including details of any risk assessment undertaken and actions proposed to mitigate identified risks.

7. Have you received a grant from Council before?

No Yes

If YES: Please name the year, the amount provided and the purpose.

8. Could the project/event proceed if only partial funding was received?

No Yes *If YES: How?*

9. How many people will benefit from your project?

Estimate numbers: Provide brief details:

10. How did you decide the project was needed?

Provide brief details:

11. How will you promote your project in the community?

Provide brief details:

12. How will you measure the success of your project?

Provide brief details:

BUDGET INFORMATION

Please note the following when preparing the Budget page:

- Please attempt the budget page before seeking assistance.
- Start with the Project Cost section and try to list all the possible costs.
- An in-kind contribution is a non-cash contribution that is given a monetary value. For example, your labour on the project. If you put 48 hours voluntary work toward the project then multiply that by \$18 per hour, this gives an in-kind contribution of \$864. Loaned equipment is also an in-kind contribution. For example, a trailer used for four hours would normally cost \$15 an hour, so that's a \$60 in-kind contribution.
- When calculating voluntary hours, only calculate the hours spent by volunteers preparing, planning and actually doing the specified project.
- If you require assistance with your application form please call Council on **1300 520 520**.
- If necessary, attach a separate project budget and ensure all associated costs are detailed.
- All expenses involved in undertaking the project must be listed in Project Costs - Section A.

NOTE: Copies of quotes or significant evidence, e.g. quotes for equipment, materials, catering, advertisements, etc., required for your project must be attached as verification. If not attached, your application will not be considered.

PROJECT COSTS - SECTION A

You must include/attach copies of quotes justifying your funding. Please include all event/project costs in this section.

1. Advertising,Promotion <i>(etc)</i>	\$
2. Materials <i>(Please specify)</i>	\$
3. Catering	\$
4. Other support <i>(e.g.other funding, please specify)</i>	\$
5. Licences, Permits, Approvals <i>(etc)</i>	\$
6. In-kind support from Council <i>(e.g. road closures, rubbish bins, clean-up, etc)</i>	\$
7. Other costs <i>(Please specify)</i>	\$
Total Project Cost	\$

PROJECT REVENUE - SECTION B

Please note: Council will fund projects on a \$2:1 ratio. Your contribution may consist of cash, assistance from other funding agencies, or up to 50% in kind such as voluntary labour or materials.

8. Amount Of Grant Requested From Council	\$
9. Your organisation's financial contribution	\$
10. Your organisation's in-kind contribution	\$
11. Donations, material, etc.	\$
12. Entrance fees or other	\$
13. Other support <i>(e.g. other funding)</i>	\$
Total Project Revenue	\$

APPLICATION CHECK LIST

(Please note, that you must complete this section to be eligible for a grant or sponsorship)

Please complete this section to provide us with information about your eligibility. You may not be able to answer all questions until you have completed the application form.

1. Will your project take place in the Buloke Shire Council area and will it benefit the community? Yes No Not applicable
2. Are you a 'not for profit' or incorporated group and have you provided a copy of your Incorporated Certificate? Yes No Not applicable
3. If you answered 'NO' to the above question have you provided a letter from the incorporated body who will be receive the grant on your behalf? Yes No Not applicable
4. If you are not incorporated have you provided a copy of your sponsor's incorporated certificate? Yes No Not applicable
5. Have you acquitted your last community grant received from Council? Yes No Not applicable
6. Have you supplied your Australian Business Number (ABN) Yes No Not applicable
7. Is your project, program or event able to continue with partial funding? Yes No Not applicable
8. Have you provided your organisation or your sponsor's latest audited/certified financials? (income and expenditure, balance sheet or trading statement) Yes No Not applicable
9. Does your budget balance and is your funding request for \$3,000 or below? Yes No Not applicable
10. Have you provided quotes to justify the amount you are asking from Council? Yes No Not applicable
11. Have you signed and agreed to the funding terms and conditions if your application is successful? Yes No Not applicable
12. Have you completed the EFT form with your bank details? Yes No Not applicable
13. Do you have matching funding? I.e. cash or in-kind equal to the amount requested? Yes No Not applicable
14. Is your organisation the owner or lessee of the land where the activity is to take place? Yes No Not applicable

Note: If work is to be performed on Council property or buildings, or if you are not the owner or lessee you must supply a letter of approval by the owner

15. Has your project already commenced or already been completed? Yes No Not applicable
16. Are you an elected member or staff member of the buloke Shire Council or a family member of either? Yes No Not applicable
17. Is the grant intended to fund general ongoing operating expenses (in part or in full)? Yes No Not applicable
18. Did your group or organisation receive a community grant within the last calendar year? Yes No Not applicable
19. Are you the recipient of an annual fixed grant from Council? Yes No Not applicable
20. Is your organisation in debt to Council? Yes No Not applicable
21. Does your project target activities in a school setting? Yes No Not applicable
22. Is your project the responsibility of the State or Federal Government? Yes No Not applicable

23. Is your group planning to renovate/upgrade or change a building in some way? Yes No Not applicable
If YES have you sought Planning/Building Approval from Council?
Please provide and attach a copy of the approval.

24. Will the project be conducted on council land. If YES have you completed Form B Yes No Not applicable

PLEASE respond to the questions below if your group/organisation has a lease, licence or **will be using Council property to undertake your proposed project.**

Name of Club/Organisation:

Date of Community Grant Application:

Do you have a lease or licence with Council? Yes No
(Including expired leases/licences)

Do you intend to use Council land including reserves and buildings to undertake your activity? Yes No

If YES to the questions above, please specify:

Name of Club/Organisation:

Name of Project:

Location of Project:

Brief description of activity:

Does the applicant's insurance cover the prescribed activity? Yes No

If YES to the question above, please attache a certificate of currency.

Have you previously sought approval from Council to undertake this activity? Yes No

If required, please attach additional information for consideration. Upon submission of the Community Grant application, this section will be forwarded to Council's Asset and Infrastructure Department where it will be considered in accordance with any agreement or approval Council may have granted to your community group for the use of Council property. This is not the same as having Building or Planning approval. Where necessary, these approvals will be required prior to the distribution of any grant.

Note: Council reserves the right to assess if a project or group may be partially or entirely exempt from the specified community grants and sponsorship criteria.

ELECTRONIC FUNDS TRANSFER INFORMATION

If successful, your grant payment will be made via Electronic Funds Transfer (EFT) to your nominated Bank, Credit Union or Building Society Account.

If you do not have a bank account, please provide details of your auspice body or the account details of someone you authorise to receive funds on your behalf.

Please complete the form below In order to ensure the swift payment of funds.

ABN/Incorporation Number: _____

Organisation Name: _____

Address: _____

Phone Number: _____

Email Address: _____

Name of Financial Institution: _____

Address of Financial Institution: _____

BSB Number: _____

Account Number: _____

AUTHORISATION

I hereby verify that the information provided is correct and request that all payments be made by direct deposit to the above account. I have authorisation to provide this information on behalf of the organisation named above.

Name: *(please print)* _____

Signature: _____

Date: _____

CONDITIONS

- 1. The Buloke Shire Council is under no obligation to verify the above bank details. Any changes must be made in writing.*
- 2. The Buloke Shire Council will not be responsible for any delays outside its control e.g. delays or errors in the banking system or errors in account details supplied*
- 3. The Recipient agrees to repay the Buloke Shire Council any payments credited to the Recipient in error.*
- 4. The Buloke Shire Council has the right to accept the authority of the undersigned as conclusive evidence of the person's authority to execute this direct credit application on behalf of the Recipient.*

AGREEMENT

Agreeing to the terms and conditions of the grant/sponsorship funding

I certify to the best of my knowledge that the statements made in the application are true.

I have read the Buloke Shire Council Community Grants and Sponsorship Guidelines.

I understand that I will be required to accept the conditions relating to the funding received from the Buloke Shire Council.

These conditions are:-

1. Supervise the administration of the grant/sponsorship.
2. Use the funds provided for the approved project/purpose.
3. Obtain any required Planning Consent and/or Building Approvals and/or permission from the land/property owner or regulatory bodies or organisations (if applicable) before commencing the project.
4. Seek Council's written approval to continue with the project if there is any change in the project.
5. Acknowledge the Buloke Shire Council on all printed material relating to the funded project or activity and provide evidence of such.
6. An appropriate acknowledgment of Council's funding must be given by the recipient in all promotional material and reports of the project available to the public.
7. Complete the acquittal process at the end of the project and forward a copy to Buloke Shire Council, PO Box 1, Wycheproof VIC 3527.
8. Invite the Mayor and/or Councillors to the project opening and/or event.
9. I/We understand that it is my/our responsibility to obtain all necessary insurances and that the Buloke Shire Council will not be held liable for any matter arising out of this grant.
10. I/We agree to indemnify and keep indemnified the Buloke Shire Council, its employees and agents from and against all actions, costs, claims, charges and expenses whatsoever which may be brought or made to claim against them out of or in relation to the project.
11. Provide a photograph of the completed project, program or event including permission for Council to use the photograph for promotional purposes. Please send/email to: Buloke Shire Council, PO Box 1, Wycheproof VIC 3527 or buloke@buloke.vic.gov.au marked to the attention of the Community Development Officer.

DECLARATION

I declare that the above details are correct and I am authorised to sign on behalf of the organisation or individual applying to the Community Grants Program:

Name: *(please print)*

Title:

Organisation Title:

Project Title:

Date:

Counter Signatory of Management Committee (where applicable)

Signature:

Name: *(please print)*

Title:

LODGEMENT



Mail:

Buloke Shire Council
Po Box 1, Wycheproof
Vic 3527



In Person:

Wycheproof - 367 Broadway, Wycheproof



Email: buloke@buloke.vic.gov.au

INTERNAL USE ONLY

To be completed by Council

Is the land or building where the proposed activity is to take place under Council care and control? Yes No

If YES to the question above, please indicate the type of arrangement:

Lease/Licence/Other - Specify: _____

Is the activity permitted in accordance with any such agreement? Yes No

If NO to the question above, is the activity approved? Yes No

Is a change to the lease/licence or agreement required? Yes No

Signature: _____

Date: _____

Position: _____