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| **THE BAROSSA COUNCIL** | **logo-coloured-graphics-23-6-99** |
| **COMMUNITY GRANT APPLICATION FORM**  (Please read the Community Grant Guidelines and complete all sections of this form) |

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| **Related Policy/Process** | **TBCPOC4450 Community Assistance Scheme Policy** | **Form Number:** | **TBCFOR4452** |
| **Form Owner:** | Manager – Community and Facilities Development | **Last Revised Date:** | **June 2017** |
| **Document Control:** | Manager – Community and Facilities Development | **TRIM Reference:** | **17/47438** |
| **Date Approved:** | **7 March 2018** | **Next Review Date:** | **June 2019** |

Date of Application:       /       /

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| **1.** | **ORGANISATION DETAILS** |

Name of organisation:

Physical address of organisation clubroom/facilities/meeting place:

Postal address of organisation:

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| **2.** | **CONTACT DETAILS FOR THIS ORGANISATION** |

Name:

Position:

Postal Address (for contact person):

Mobile:

Home Phone: (   )

Work Phone: (   )

Email:

Preferred Method of contact

Home Phone  Work Phone  Mobile  Email

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| **3.** | **GROUP/ORGANISATION GST STATUS (PLEASE TICK)** |

In accordance with current tax legislation, Council is obliged to withhold 46.5% of the grant and forward this amount to the Australian Taxation Office (ATO) if an Australian Business Number (ABN) is not provided prior to payment of funds. Applicants that have an ABN and are GST registered must provide a tax invoice prior to payment being made. Council will gross up the Grant for the appropriate GST amount, provided all requirements in regard to GST are met to Council’s satisfaction.

Applicants that are unable to provide an ABN must legitimately complete a “Statement by Supplier” form which is available from Council. If not provided, Council will be required to withhold 46.5%.

No ABN and not registered for GST

(Please request and include a ‘Statement by Supplier’ form to go with your application)

ABN but not registered for GST (please attach a copy of ABN Certificate)

ABN and registered for GST (please attach a copy of ABN Certificate)

Currently applying for ABN/GST registration

(When received, Council will require this information before funding can be made)

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| **4.** | **PROOF OF INCORPORATION (AS PER GUIDELINE 1.2)** |

Is your Organisation incorporated? Yes  No

(If yes, please provide a copy of the Certificate of Incorporation and go to Section 5)

If No, are you affiliated with an incorporated body?

Yes  (Please note: An auspice agreement is required if the organisation applying for funding is not part of an incorporated body.)

**Auspice Information**

Auspice Organisation Name:

Contact Person:

Postal Address:

Telephone (Bus. Hours) (   )       Email:

**Auspice Declaration:**

I,       certify that

will auspice this proposal and take legal and financial responsibility for the administration of any approved grant funds.

Full name of Authorised Officer:

Title of Authorised Officer:

Signature:       Date:       /       /

No  You are ineligible to apply for a Community Assistance Grant.

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| **5.** | **ABOUT YOUR ORGANISATION** |

What are the Aims and Objectives of your Organisation?

(Please attach a copy of your organisation’s Terms of Reference/Constitution)

How long has your organisation been established?      yrs      mths

Number of members associated with your organisation:

What proportion of members resides in The Barossa Council area?

Is your organisation associated with or does it receive funds through it normal activity, such as bar or canteen facilities?

(See Community Grant Guideline 3.15) Yes  No

If yes – please detail

Is any form of Government funding received by your organisation?

Yes  No

If yes – please detail as you may be ineligible to apply for a Community Assistance Grant over $500.

(See Community Grant Guideline 3.3)

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Has your organisation received assistance from The Barossa Council in the past 3 years?

(This includes cash or in-kind (e.g. Road closures, venue hire etc.)

(See Community Grant Guideline 3.6) Yes  No

If yes – please detail

CASH AND INVESTMENTS

Please provide information on what the cash and investment holdings are earmarked for.

(This will assist in the assessment of this application - See Community Grant Guideline 3.14)

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| **6.** | **PROJECT DETAILS** |

Project Title:

Description of Project:

(Briefly outline your project, the goals and aims, and how it will benefit the community)

Amount of funding applied for: $

Which Strategy from Council’s Community Plan does your project relate to and how? (The Community Plan is available on Council’s website via [this link](https://www.barossa.sa.gov.au/sections/council/strategies-policies-bylaws/barossa-community-plan-2016-2036))

Location of the project:

Could the project/event proceed if only partial funding is received? Yes  No

Provide details:

Proposed start date:       /       /       end date:       /       /

Is your project upgrading/enhancing land or a building? Yes  No

Who owns the land/building?

(If the applicant is not the owner, written consent must be obtained from the land/building owner and submitted with your application.)

Has Council been contacted in relation to whether approval is needed for this project? Yes  No

Who will benefit from your project?

How many people       Age range of people

Range of groups       Activity areas

How will you measure the benefit to these groups?

Has any other funding been sought for this project? If so, what was the outcome of the application?

Any further information which may be relevant to this application

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| **7.** | **BUDGET AND FUNDING** | | |
| **PROJECT INCOME** | | (Group’s Contribution to Project) |  | |
| Group Funds | | $ |  | |
| Fundraising Activities | | $ |  | |
| Donations | | $ |  | |
| In Kind (provide details) | | $ |  | |
| Other (provide details) | | $ |  | |
|  | |  |  | |
|  | | **Total** **Group’s Contribution** | $ | |
|  | |  |  | |
| Council Assistance Requested | |  | $ | |
|  | |  |  | |
| **TOTAL PROJECT INCOME** | | | $ | |

**PROJECT EXPENDITURE (**Please provide an itemised list of expenses for the project)

      $

      $

      $

      $

      $

      $

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| **TOTAL PROJECT EXPENDITURE** | **$** |

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| **8.** | **REQUIRED SUPPORTING DOCUMENTATION** |

**The following documents for your organisation are mandatory and must be attached to this application.**

**If you are not an incorporated body, your auspice organisation is also required to provide their documents.**

ABN Certificate or Statement by Supplier form

A copy of your organisation’s Certificate of Incorporation

or

Auspice information completed and a copy of their Certificate of Incorporation

A copy of your organisation’s Terms of Reference/Constitution

A copy of your organisation’s most recent AGM Minutes

A copy of your organisation’s last Audited Financial Statements

**The following documents must be attached if applicable:**

Endorsement from the asset owner (if applicable - see 3.11 of the Guidelines)

Details of cash holdings exceeding application amount (if required – see 3.14 of the Guidelines)

Letters of support for your project

Plans / quotes / images etc.

This application must be signed by two current senior office holders of the organisation.

i.e. President, Treasurer, Secretary.

SIGNATURE SIGNATURE

POSITION       POSITION

DATE       /       /       DATE       /       /