



**Community Support Grant Program - application form**

**Infrastructure /Environment**

**SECTION ONE – Applicant Details**

Name of Organisation :

**Authorised Person’s Details**

Title		First Name		Surname	
Position					
Postal Address					
Town/Suburb				Post Code	
Phone		Fax		Email	
Is your organisation registered for GST? Yes/No?					
If yes, what is your ABN?					
Does your organisation use a facility controlled by a Committee of Management?					
If yes, do you have their approval for this project?					
Council <input type="checkbox"/> Other, please specify <input type="checkbox"/>					
<b>(Please provide written approval)</b>					
Does your organisation have Public Liability Insurance?					
<b>(Please provide copy of certificate)</b>					

**SECTION TWO – The Project**

Project Name:	
What are you going to do (Describe the project in one or two sentences):	





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Anticipated Project/Event start date:	
Anticipated completion date:	
Who will manage the project:	

**SECTION THREE – Project Details That Address The Assessment Criteria**

What community groups will benefit (which demographic groups?)	
Expected number of people this will benefit?	
How often is the expected use of the facility or service?	

*Please provide information demonstrating how your project addresses the following assessment criteria*

Describe why this is needed?	





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Demonstrate to what extent this project links to council plans (eg Township Community Action Plan, Council Plan, Open Space and Recreation Strategy, Health and Wellbeing Plan, Access and Inclusion Plan)

**SECTION THREE – Project Details That Address The Assessment Criteria (Continued)**

What are the expected outcomes?	
How will it benefit future and current generations?	
Will additional revenue be gained by the project? Yes/No  If yes, please provide details.	





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**SECTION FOUR - Budget**

<b>EXPENDITURE</b>	<b>Amount \$</b>	<b>Confirmed Y/N</b>
Professional Planning/advice & permits		
Project Coordination		
Equipment, Materials and Infrastructure <b>(Please provide quotes)</b>		
Site/Venue Hire		
Other expenses (Please specify)		
<b>TOTAL</b>		

<b>INCOME</b>	<b>Amount \$</b>	<b>Confirmed Y/N</b>
Cash from your organisation		
In kind from your organisation		
Other Income ( Please specify)		
Request from this program		
<b>TOTAL</b>		

Expenditure must equal Income

Funding is provided on a dollar-for-dollar basis. In-kind support, as part of the applicant's contribution, should not exceed 25% of the total project cost. In-kind values should be calculated at \$20 per hour for unskilled labour and \$45 per hour for professional/skilled labour as set by State Government guidelines.





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**SECTION FIVE - Declaration**

I state that the information in this proposal is to the best of my knowledge true and correct. I understand that this is a proposal only and may not necessarily result in funding approval.  
 (must be completed by a person with delegated authority to submit a proposal)

Full Name			
Position			
Signature		Date	

**SECTION SIX - Attachments**

Please include the following documents in your application:

- Current list of committee members
- Letters of Support
- Bank Statement

**SECTION SEVEN - Checklist**

- Have you given the project a name?
- Do you have \$ for \$ in matching contribution with no more than 25% of total project cost being in kind?
- Have you attached copies of quotes?
- Have you completed the budget section and do the figures match?
- Have you attached list of committee members?
- Have you attached a bank statement?
- Have you attached written approval from Committee of Management if required?
- Have you attached a copy of your public liability insurance certificate?
- Letters of support?

