Applicant Eligibility

* indicates a required field

What do I need to do before applying?

- Read and understand the Guidelines and Eligibility Criteria
- We recommend that you speak to a Council Officer about your project

You will need to have the following information available to complete this form:

- Your incorporation and ABN number
- Agreement with auspicing organisation if applicable
- A copy of your most recent financial statement
- Any other supporting documents (letters, photos, articles etc)
- Written approval from the land owner if applicable
- Quotations if applicable

Ineligible and late applications will not be considered.

To ensure your supporting documentation is reviewed by the assessment panel, please upload it directly to your application form before you submit it. Unfortunately due to the large volume of applications received, we cannot accept information provided after the closing time.

Contact Council's Grants Officer on (07) 5329 6437 or grants@noosa.qld.gov.au

• Frequently Asked Questions

legal not for profit is your organisation? *

An incorporated association

• Help Guide for Applicants

Your Organisation Name Organisation Name	
Have you read the Funding Guidelines guidelines? ○ Yes	and are you eligible as per these ○ No
If no, do not proceed with this application. If you spoke to a Council Officer, what	
Are you a legal not for profit entity as	defined by the ATO? If so, what type of

If you are a Co-op or Trust, please upload your constitution/governing documents. Attach a file:

Which of the following Commu	unity Development priorities does your project
	s, exhibitions, museums, performing and visual arts, local, age)
	. service organisations, men's sheds, community halls and
	elfare services, disabilities, disadvantaged, aftercare of
O Public Safety (e.g. rescue, abu	use prevention, disaster and emergency management) st clubs & groups e.g. collecting, language, genealogical,
	. undertaken to improve physical fitness, may have conditions of play)
What insurance does your org activities? *	anisation have in place to conduct your usual
□ Public Liability Insurance□ Volunteer Insurance□ Building Insurance	☐ Contents Insurance☐ Professional Indemnity Insurance☐ Other
Project Details	
* indicates a required field	
Project/Event Title *	
Must be no more than 10 words.	
Location of where will this pro Address	oject/event will take place? *
Address Line 1, Suburb/Town, State/P	rovince, Postcode, and Country are required.
Description of your project (w	hat are you going to do?) *
Word count: Must be no more than 250 words	

Explain the who, what, where and how for this project. Be clear and concise, avoid jargon.

Project Start Date *	
	See guidelines for the project delivery timeframe for this round
Project End Date *	
	See guidelines for the project delivery timeframe for this round
Why is this project needed?	(Consider what problem it will solve) *
Word count:	
Must be no more than 250 words. Why and how did you determine the	ne project or item is needed and necessary? What is the
current situation? What challenges	or issues are you facing? Who is affected? Is there an unmet
www.noosa.qld.gov.au/data-statisi	data, statistics and trends for the Noosa Shire. Go to https://cics
What benefits will this proje	ect deliver? *
Word count:	
Must be no more than 250 words.	
What will change as a result of this	s project happening? Who will benefit and how will they benefit?
Describe how your organisa	
	ition has capacity and capability to deliver the project
within the required time fra	
within the required time fra	
within the required time fra Word count:	
Word count: Must be no more than 250 words. Hint: Provide details of internal an	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words.	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved?	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved?	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved? * indicates a required field	d/or external resources/people who have the experience,
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved? * indicates a required field	d/or external resources/people who have the experience, dedicated to deliver the Project
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved? * indicates a required field How many members/clients	d/or external resources/people who have the experience, dedicated to deliver the Project does your organisation have? *
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved? * indicates a required field How many members/clients Estimate how many people	d/or external resources/people who have the experience, dedicated to deliver the Project
Word count: Must be no more than 250 words. Hint: Provide details of internal an appropriate qualifications and are Who Is Involved? * indicates a required field How many members/clients	d/or external resources/people who have the experience, dedicated to deliver the Project does your organisation have? *

Estimate out of all the people involved in many will be volunteers? *	n coordinating your project/event, how
Overall, how many people will directly b event in the wider community? *	enefit from this particular project or
Details about partners / collaborate	ors.
If your organisation is partnering or collabora project, provide details below:	ting with any organisations to deliver this
Name of partner or collaborator.	Contribution to the project
Consent	
Consent If your project is to host an event, you n application for an event permit must be before the event.	
If your project is to host an event, you n application for an event permit must be	submitted to Council at least six weeks
If your project is to host an event, you mapplication for an event permit must be before the event. Who owns the land where the project/event of the controlled land of the state Government. Has your organisation sought permission complete this project/event?	ent is taking place? Freehold / privately owned Other: n from the land owner/manager to
If your project is to host an event, you mapplication for an event permit must be before the event. Who owns the land where the project/eventh of Noosa Council owned / controlled land of State Government Has your organisation sought permission	ent is taking place? Freehold / privately owned Other:
If your project is to host an event, you mapplication for an event permit must be before the event. Who owns the land where the project/event of the controlled land of the state Government. Has your organisation sought permission complete this project/event?	submitted to Council at least six weeks ent is taking place? Freehold / privately owned Other: n from the land owner/manager to Not required

Project Budget

- * indicates a required field
 - All amounts in this budget must **not** include GST. (Click <u>here</u> for an online GST calculator).
 - The Income and Expenditure and the Total Project Cost should be equal.
 - All infrastructure / building projects must have at least 50% contribution to the project.
 - Include the supplier's name in the expenditure item description.

Round 20 Application

Form Preview

- Quotes are required for any expenditure items over \$1000 as follows:
 - Between \$1000 and \$7499 one (1) written quotation is required
 - Over \$7500 three (3) quotations are required.
- <u>The Australian Bureau of Statistics</u> advises the hourly rate for volunteer labour is \$46.00.
- Any volunteer hours should be listed in both the income and expenses as in-kind.
- Donated materials must be allocated a dollar value and appear in both the income table and the expenditure table.

Project Budget

Please complete your full project budget below. Do not use commas, full stops of the "\$" sign in your amounts. The total income and expenditure will automatically add up in the totals below the budget table. The 'Total Income Amount' cell and the 'Total Expenditure Amount' cell must be the same. The 'Income minus Expenditure' cell will automatically calculate and needs to be 0 to proceed. This means that your income and expenditure are equal.

Description of Income	\$ Income (excluding GST)	Description of Expenditure	<pre>\$ Expenditure (excluding GST)</pre>
Include Council funds, your funds, In kind	Amount must exclude any GST.	List each expenditure item per line	Amount must exclude GST.
your runus, iii kina	Must be a number.	item per inie	Must be a number.
Council		In Kind	
In Kind			
Your Organisation			
_			

Total Income Amount	Total Expenditure Amount	Income minus Expenditure
\$ This number/amount is	\$ This number/amount is	For this form to proceed this cell below will need to be 0 (Income and Expenditure equal the same value) *
calculated.	calculated.	\$
		This number/amount is calculated.

What is the	total	cost (of your	project?	*
\$					

Must be a dollar amount.

Funding amount you	ı are requesting from	Council (as shown in	n budget income) *
\$			

Must be a dollar amount and between 1000 and 30000.

Your financial contribution - if applicable (as show in budget income) *

Must be a dollar amount.

Your In Kind Contribution - if applicable (as show in budget income) *
\$ Must be a dollar amount.
Must be a dollar amount.
Please list the items from your budget that you are requesting funding for. *
If there is a shortfall in funding, please advise how you will address this?
Please list any unconfirmed income (Eg. Grant from another source)
Upload your quotations here.
Attach your quote(s) here. Attach a file:
One quote is required for each expenditure item valued over \$1000. Three quotes are required for an expenditure items over \$7500.
Is there any information you would like to add about the budget or the quotations?
Word count: Must be no more than 100 words. For example, if you have expenditure items in your budget which are over \$1000 (1) or \$7500 (3) and have not uploaded any quotations then you will have to explain why this was not possible, or your application will be ineligible.
Financial Statements
Upload your most recent financials (profit and loss sheet and balance sheet or audited financials) here. * Attach a file:
Provide your most recent audited financials as well as a current profit and loss statement and balance sheet.

Applicant Details

* indicates a required field

Applicant organisation details

Organisation's primary (Address	(physical) ad	ddress *	
Suburb State Postcod	е		
Must be an Australian post cod	de		
Applicant organisation's	postal add	ress (if different	t from above)
Address			
Suburb State Postcod	e		
Must be an Australian nest as	do		
Must be an Australian post coo	ue		
Applicant organisation's	website or	social media lin	ık
Must be a URL			
Applicant organisation's	Australian	Business Numb	er (ABN) *
Applicant organisation's	Australian	Business Numb	er (ABN) *
The ABN provided will be us	sed to look u	o the following inf	er (ABN) * ormation. Click Lookup abov
The ABN provided will be us	sed to look u ed the ABN co	o the following inf orrectly.	
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The ABN provided will be use check that you have entered information from the Australia ABN Entity name ABN status	sed to look u ed the ABN co	o the following inf orrectly.	
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The ABN provided will be use check that you have entered information from the Australia ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed	sed to look uped the ABN co	o the following inforrectly.	
The ABN provided will be use check that you have entered information from the Australia ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type	sed to look uped the ABN co	o the following inforrectly.	
The ABN provided will be use check that you have entered information from the Australia ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration	sed to look uped the ABN co	o the following inforrectly.	
The ABN provided will be use check that you have entered information from the Australia ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location	sed to look uped the ABN co	o the following inforrectly.	
Information from the Australia ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions	sed to look uped the ABN co	o the following inforrectly.	
The ABN provided will be use check that you have entered information from the Australia ABN Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location Must be an ABN.	sed to look uped the ABN co	o the following inforrectly.	

Position held in organisation *		
Daytime phone *		
	Must be an Australian phone number.	
Email address *		
	Must be an email address.	
Auspice Details		
Auspice organisation deta	ails	
	porated, a company limited by guarantee, a no enous corporation, your application needs to b	
responsibility for the delivery of t	ne auspice organisation will take full legal and the project and the grant administration. For expending Deed of Agreement, receive the grantal report.	xample, the
	Auspice Agreement or at least a letter from the he Auspice Organisation which indicates they uspice responsibilities.	
	Agreement format. It is the responsibility of the ment is completed, signed and uploaded with t	
 What type of legal not for pro An incorporated association A company limited by guaran A non-trading/non-distributing An Indigenous corporation 		
Attach a signed auspice agree Attach a file:	ement here.	
Recommended no more than 5MB pe	er attachment.	
Auspice organisation name Organisation Name		
Auspice ABN		

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Informatio	n from the Australia	n Business Register
ABN		
Entity nan	ne	
ABN statu	S	
Entity type	e	
Goods & S	ervices Tax (GST)	
DGR Endo	rsed	
ATO Chari	ty Type	More information
ACNC Reg	istration	
Tax Conce	essions	
Main busir	ness location	
Must be an	ABN.	
Augulalu	a Cantact Datail	1-
Title	g Contact Detail First Name	Last Name
Position	in Auspice Orga	nisation
e.g. Presid	ent, Treasurer, Secr	etary
Auspice	postal address	
Address		
Auspice	Email	
Must be an	email address.	
Auspice	Phone Number	
	Australian phone n	
Please prov	vide the best contac	ct phone number.
Infrastr	ucture Projec	cts
↑ indicate	s a required field	
Sour pour pour pour yes on the second in th	roject an Infrast	tructure Project?
J . C3		0 110

Specific questions for infrastructure, heritage or building projects

This section will only need to be filled out if your project is an infrastructure, heritage or building project.

Co-funding requirements for Infrastructure projects:

Council cannot contribute more than 50% of the cost to building works or infrastructure. If, for example, the total project cost is \$9,000, the maximum Council contribution to the project would be \$4,500 and your contribution would be at least \$4,500. This can be made up of a combination of cash, other grant funds, in-kind donations of materials and volunteer labour.

up of a combination of cash, other grant funds, in-kind donations of materials and volunteer labour.
Do you meet Council's co-funding requirements? * ○ Yes ○ No - do not continue
 Who owns the land where the project work is being undertaken? * Noosa Council owned / controlled land State Government Freehold / privately owned
Request to conduct works on Council owned/managed land
Where Council is the owner or trustee of the land, on which the building works are intended, the completed Community Organisation Check for New Works Form must be submitted with this grant application. Find out more here .
To download the PDF version of the form click on this link: <u>Checklist for New Works on Council Owned or Controlled Land PDF version.PDF.</u>
Upload the completed Checklist for New Works form here: Attach a file:
Evidence Owner's Consent - State Government or Freehold.
The owner of the land or facility on which the building works are intended must provide permission for the building works to proceed. Evidence of the permission must be submitted here.
Upload evidence of owner's consent here. Attach a file:

Certification

* indicates a required field

Acknowledgement

•	•	acknowledge Co se to acknowledg	

See the Acknowledgement section of the guidelines.

Privacy Notice

Council will only use personal information you have provided for the purpose of processing this application and for remaining in contact with you. Council is authorised to collect this information in accordance with the *Local Government Act 2009* and other local government acts. Your personal information is only accessed by persons authorised to do so. Your personal information is dealt with in accordance with Council's Privacy Policy.

Please note the information provided in this application and in any related documentation and discussions may be provided to members of the assessment panel in order to assist Council in assessing your application.

By submitting this application you consent to Council publishing the organisation's name, the project's name, project description and Council's funding contribution. This information may also be used for promoting Council's funding programs.

I agree to the Privacy Statement above. *

Yes

Certification

I certify that to the best of my knowledge the statements made within this application are true and correct and I understand that if Noosa Council approves the grant, I will be required to accept the terms and conditions of the grant as outlined in the grant application, policy and funding agreement.

I am authorised by my group/organisation to complete this form and I agree that:

- all statements made in this application are true
- all necessary permits/approvals will be obtained prior to the beginning of the project
- the project will be covered by appropriate insurance
- all relevant health and safety standards will be met
- Council does not accept any liability or responsibility for the project
- my organisation has met all acquittal conditions and has no debt to Council

If successful, I will:

- accept the terms of the grant by submitting the online funding agreement within 4 weeks of notification
- complete the project within twelve months of receiving Council funding
- complete the online acquittal within 30 days of the project end date given in the application

I agree to the above *	Yes		
Name *	Title	First Name	Last Name
Organisation Name *			
Position *			
Phone Number *			