

Community Grants Program Application Form 03

PRIVACY NOTICE: SOUTH BURNETT REGIONAL COUNCIL IS COLLECTING THE PERSONAL INFORMATION YOU SUPPLY ON THIS FORM FOR THE PURPOSE OF COMMUNITY GRANTS PROGRAM YOUR PERSONAL DETAILS ARE HANDLED IN ACCORDANCE WITH THE INFORMATION PRIVACY ACT 2009 AND WILL NOT BE DISCLOSED TO ANY OTHER PERSON OR AGENCY EXTERNAL TO COUNCIL WITHOUT YOUR CONSENT, UNLESS REQUIRED OR AUTHORISED BY LAW.

1. GRANT PROGRAM	In-Kind Sponsorship up to \$2,000:			
(Tick Required In-Kind)	☐ Supply of Gazebo Marquee;			
	☐ Supply of Minor Works i.e. Mowing, Grading;			
	☐ Supply of Road Signage and Barriers;			
	☐ Supply of Skip Bins;			
	☐ Supply of Wheelie Bins; and/or			
	☐ Supply of Chairs.			
	Please Note: You must provide Council with a minimum of 3 weeks' notice for requested services			
	This is a cover sheet and summary. Attachments are required.			
	All In-kind Services provided by Council are dependent on operational priorities, availability of resources and overall annual Budget allocation			
	Applications can be made throughout the financial year			
2. APPLICANT ORGANISATION				
Postal Address				
Contact Person for this Application				
Contact Details	Phone (Business Hours)	Mobile	Fax	
Email Address				
Website Address (If Applicable)				
Is your organisation non-profit?	☐ Yes	□ No		

What year was your organisation established?	How many members does your organisation have?	Approximately how many people access your organisation facilities/services annually?	
3. PROJECT Describe the project or activity	Project Name: Short Description: How will this event/project benefit the community?		
Date of program/ commencement of project			
What In-Kind is required?			
(Please list in detail what is required)			
Are the above items requested to be delivered?	Y or N Address & Date of Delivery:		
4. LOCATION	Physical Address (site of project)		
Must be within the boundaries of the South Burnett Regional Counci area			
5. SUPPORTING DOCUMENTS	☐ I have not applied for other fundi this event in this financial year?	ng in the Community Grants Program for	
This form is a cover sheet only.	☐ Financial Statements (Most Recent)		
Please attach all	☐ Other relevant supporting documentation , please list:		
requested supporting documents as these	1.		
are <u>mandatory</u> for assessment.	2. 3.		
		nonstrate the need and benefit to the	

6. CERTIFICATION

To be signed by an executive member of the Organisation

- I certify to the best of my knowledge that the statements made in this application are true and correct.
- I understand that approval of support is subject to a signed agreement between the South Burnett Regional Council and the applicant.
- I understand that the South Burnett Regional Council does not accept any liability or responsibility for the supported project/event and that it is the responsibility of the applicant to provide the appropriate insurance cover.
- I agree a project summary and financial report (acquittal) will be supplied (including a copy of all required receipts) within 6 weeks of completion.

Name:

Executive Position Held:

Signature: Date:

7. LODGEMENT OF APPLICATION

Late applications will not be considered.

Applications must be postmarked or received by Council prior to the closing date advertised.

Post to: South Burnett Regional Council

PO Box 336

KINGAROY QLD 4610

Deliver to: Any South Burnett Regional Council Customer Service Centre

Fax to: (07) 4162 4806

Email to: info@southburnett.gld.gov.au

Please contact Council's Community Development/Grants Officer, Kimberley Donohue on (07) 4189 9100 for any further details