

Community Assistance Grants and Sponsorship Funding – Round 2



6177 Great Northern Highway
PO Box 70
BINDOON WA 6502

(08) 9576 4600

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www.chittering.wa.gov.au

Office Use Only			
Officer:		Date:	/ /
Record #		Acknowledgement #	O
File#	/ /	Successful/Unsuccessful	O

It is a condition of the funding, that Applicants:

1. Contact Alison Reliti, on 9576 4600, to discuss their application before making their submission.
2. For applications over \$500 Applicants must have participated in, or contributed to, at least one Shire event in the previous financial year.
3. Christmas and Australia Day Functions must be applied for on this form. There will be no additional funding round for these events this financial year.

DUE DATE: Please return the completed application and any accompanying documentation no later than 4.00pm Friday, 9 November 2018. An electronic signature is permitted for emailed applications.

Section A: PROJECT / EVENT SUMMARY			
Organisation:			
Project/Event Title:			
Project or Event Date/s:	Start Date:	/ /	Finish Date: / /
Total Budget:	\$		
Requested Funding:	\$		
Contacted Shire Officer	Name:		Date: / /
Community Grants Workshop	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Section B: APPLICANT DETAILS			
Postal Address:	Street Address		
	Suburb	State	Postcode
Please give the name and telephone / email contact for the person in your organisation who can help us if Council require further information. Under the Privacy Act (1988) you must get consent from this person before recording their details below.			
Contact Person:		Phone:	
Email:			
Does your organisation have an ABN? <small>If you do not have an ABN, please download, complete and enclose a Statement by Supplier Form available from https://www.ato.gov.au/forms/statement-by-a-supplier-not-quoting-an-abn/</small>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is your organisation registered for GST?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Is your organisation incorporated? <small>Please enclose a copy of your Certificate of Incorporation.</small>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Do you have Public Liability Insurance? <small>All event applications will require the applicant to provide Council with a certificate of currency for Public Liability.</small>	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

Section C: FUNDING CATEGORY

Please identify which of the following funding categories you are applying for. You will be required to submit 2 forms if applying for both Grants and Event Sponsorship. In-Kind costs associated with Grants or Sponsorship must be included in the relevant application

Community Assistance Grants (CAG)

CAG funding are available to Community Groups and are designed to provide benefits to Shire residents through recreational, sport, social or cultural means. Grants can be used towards infrastructure and equipment in the Shire of Chittering. Examples of previously successful grants include; uniforms, kids play equipment and air-conditioning.

Community Event Sponsorship Funding (CSF)

Council understands and appreciates the importance of events and programs in creating healthy communities. CSF is made available to community groups to be used toward the costs associated with equipment hire, venue hire, entertainment, and catering for community events or programs in the Shire of Chittering. Examples of successful sponsorships are gala days, rodeo and art exhibitions. *Please ensure you discuss Shire Event Approval requirements when you make contact with the Shire regarding your application.*

Section D: PROJECT DETAILS / EVENT DETAILS

To assist the Working Group to assess your application, please provide details of your project, including its benefit to the residents of the Shire of Chittering. You are welcome to attach additional pages, or your Project Plan, should there be insufficient space.

Project Description – Objectives, Expected Outcomes and Proposed Actions / Purchases.

Are you working with any other community groups or businesses in the delivery of this project?

Organisation	Contact Name	Phone

Section E: FINANCIAL DETAILS.

BUDGET

Please provide a detailed budget for the activity or project you are requesting funding for. All costs should be itemised in the space provided below. Quotes are required for costs over \$500. Please note that your income and expenditure should match.

(1) Budget Items (i.e. what the money will be spent on.	(2) Shire of Chittering Funding (\$ (excl. GST)	(3) Other Cash Funding Amount (\$ (excl. GST)	(4) In-Kind Support - Please estimate the dollar value of the in-kind support (\$)	Source of Other Cash Funding or In Kind Support — Please state if confirmed or unconfirmed
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
Total : \$	\$	\$	\$	

Section F: DECLARATION

I hereby declare that the information supplied here on behalf of the named organisation is correct. I consent to the Shire of Chittering Council collecting the personal contact details provided above. We acknowledge your right to have access to our personal information, in accordance with the Privacy Act 2000.

I also declare that I have read the Shire of Chittering Community Assistance Grants / Sponsorship Guidelines and agree to comply with the provisions included.

Name:		Date: / /
Position*: <small>*must be an executive committee member.</small>		
Bank Account:	-	
	BSB Number	Account Number
Account Name:		

Please submit your application by no later than 4.00pm on Friday, 9 November 2018
To: Shire of Chittering

Mail: PO Box 70, Bindoon WA 6502
Address: 6177 Great Northern Highway, Bindoon WA 6502
Email: cdo2@chittering.wa.gov.au

Please ensure you have included the following items with your application where applicable.

Attached	N/A	Details.
<input type="checkbox"/>	<input type="checkbox"/>	Certificate of Incorporation
<input type="checkbox"/>	<input type="checkbox"/>	Current Financial Statement for the previous financial year (for requests over \$1000)
<input type="checkbox"/>	<input type="checkbox"/>	Copies of letters of support from key partners
<input type="checkbox"/>	<input type="checkbox"/>	Statement by Supplier (If you do not have an ABN)
<input type="checkbox"/>	<input type="checkbox"/>	Copy of written quote/s for any costs over \$500
<input type="checkbox"/>		Other, please specify.