



### Application Form

#### Section A: APPLICANTS DETAILS

Organisation Name:			
Is your organisation not- for-profit?	Yes <input type="checkbox"/> No <input type="checkbox"/>	Is your organisation incorporated? <i>(Please attach your Certificate of Incorporation)</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
What is your Organisation Background? (Aims, Numbers of Member, History)			
Do you have Public Liability Insurance?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	

#### Section B: CONTACT DETAILS

Name of Applicant:					
Position:					
Address:		Suburb:		Postcode:	
Postal Address:		Suburb:		Postcode:	
Mobile Number:		Work:			
Email Address:		Website:			

#### Section C: AUSPICING ORGANISATION DETAILS (Provide if your corporation is not incorporated.)

Organisation name:					
Contact Name:					
Position:					
Address:		Suburb:		Postcode:	
Postal Address:		Suburb:		Postcode:	
Mobile Number:		Work:			
Email Address:		Website:			

**\*Please attach a copy of Certificate of Incorporation for the Auspicing agency.**

#### Section D: PAYMENT INFORMATION

Please complete information below in relation to your organisation or the organisation who is auspicing your application if you are not incorporated.

Does your organisation/group have an Australian Business Number (ABN)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide your Australian Business Number (ABN)? If no, please complete and attach a copy of the Statement by Supplier form.		
Is the organisation/group registered for Goods and Services Tax (GST)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

#### Payment Details

ACCOUNT NAME	BSB	ACCOUNT NUMBER



### Section E: PROJECT DETAILS

Project/Activity Name:

Project Location:

Who owns or controls the location where the project is to be located:

Project/Activity Description (type, objectives, expected outcomes, proposed actions / purchases. You are welcome to attach additional pages, or your project plan, should there be insufficient space):

Expected Project Commencement Date

Expected Project Completion Date

Are you working with any other community groups or businesses in delivery of this project / event? Yes  No

How will the community get benefit from your project/activity?

Does your event require any licenses, permits and approvals?

If yes, have you already applied for these?

*\*Please attach copies of these applications.*

What type of community consultation has been undertaken?

Please provide the copies of consultation report or research that has been undertaken. *(If applicable)*



# SHIRE OF COOROW

COMMUNITY GRANT PROGRAM 2023/2024

Coorow Administration Centre  
22-26 Main Street, Coorow WA 6515

Leeman Administration Centre  
20 Morcombe Road, Leeman WA 6514

[admin@coorow.wa.gov.au](mailto:admin@coorow.wa.gov.au) | (08) 9952 0100

## Section F: BUDGET

Please attach written quotes for the works/services you are proposing. **INCLUDE GST** in the costing.

Total Project / Activities Cost	\$
Amount requested from Council	\$
Do you require any in-kind support component from Council?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has your organisation/group received financial support from Council in the past? If yes, provide details of when and how much?	

### Breakdown of Costs

Budget Item	Shire Community Grant	Other Cash or Grants	Source In-kind Support	Shire In-kind Support Requested
What the funding is to be spent on.	Proposed grant expenditure from the Shire of Coorow Community Grant Program only.	Any other cash income anticipated for this project from the applicant and/or project partners.	An estimated dollar value of the in-kind support for the project from the applicant and/or project partners (Hours @ \$25).	List of any In-kind support and if this is confirmed or unconfirmed with the Shire.
<b>TOTAL</b>				



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## Section G: PROMOTION

How will you promote and acknowledge the Shires contribution to this event / project?

## Section H: DECLARATION

I hereby declare that the information supplied on behalf of the named organisation is correct. I consent to the Shire of Coorow collecting the personal contact details provided in this application. 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 Coorow Community Grants Program Guidelines and agree to comply with the provisions included.

Applicant's Signature:

Date:

Applicant's Name:

Position in Organisation/Group:

Name of Organisation/Group:

Witness' Signature:

Date:

Witness' Name:

## Section I: CHECKLIST

Proof of Incorporation (either applicant or auspicing organisation) attached	<input type="checkbox"/>
ABN details provided	<input type="checkbox"/>
Written quotes for works/services attached	<input type="checkbox"/>
Supporting documents attached (i.e. letters of support, consultation reports) (if applicable)	<input type="checkbox"/>
Application has been signed by an authorised person	<input type="checkbox"/>
Any other supporting documentation is attached (if applicable)	<input type="checkbox"/>

<b>Due Date</b>	<b>Close of Business, 30<sup>th</sup> April 2023</b>
<b>Submit Applications to:</b>	Chief Executive Officer Shire of Coorow PO Box 42 COOROW WA 6515 or, <a href="mailto:ceo@coorow.wa.gov.au">ceo@coorow.wa.gov.au</a>
<b>For more information contact:</b>	Ayu Orma on 9952 0100 or <a href="mailto:cdo@corow.wa.gov.au">cdo@corow.wa.gov.au</a>



### Section J: CONDITIONS

The following conditions are relevant to each and every application for funding:

1. Only one application should be submitted for each organisation/group in any financial year (unless supporting an auspicious application);
2. Applications must be received by **4.00pm on Sunday 30<sup>th</sup> April 2023**, late applications will not be considered;
3. Applicants can request funding of up to \$5,000 from Council per grant round.
4. The project must take place within the financial year, unless an extension of time is approved by Council;
5. Approval must be obtained from Council for any significant change to the project;
6. The applicant must acknowledge Council's support in its advertising or publicity of the project;
7. Wherever possible promotional material must include the Shire's logo;
8. Each project is to be considered on its merits and an allocation made in the Budget for that specific project/activity within the constraints of the Budget;
9. Organisations/groups will be advised of the outcome of their application in August annually or on adoption of Budget;
10. The project/activity will be run under the auspices of the applicant if you are not incorporated;
11. In order to receive grant monies, successful applicants are required to invoice the Shire of Coorow up to the agreed grant amount allocated with accompanying evidence of payment towards the project/activity.
12. Grant allocations that are not accessed within 9 months from notification of success will be forfeited (unless an extension of time has been approved by the Shire CEO); and
13. The applicant must abide by any other conditions of approval on the grant by Council.

Further, Council will:

1. Only allocate funds for identified purposes and with specific expenditure estimates provided;
2. Require each applicant organisation to submit a new funding application on each occasion before any funds are allocated;
3. Require each application for funding to be in writing on the appropriate form with the required supporting documentation supplied;
4. Expect each successful applicant to agree that they do not represent Council in any capacity;
5. Allocate grants inclusive of GST provisions, where applicable.

### Shire of Coorow Checklist *(Office use only)*

Task	Date	File	Officer	Initial
Application received				
Application – written acknowledgement				
Application evaluated				
Application presented to Council				
Applicant notified of outcome				
Project/activity undertaken				
Project/activity promoted				
Invoice and supporting evidence of payment submitted by Applicant				
Invoice paid to Applicant				