

Environmental Project Grant Application Form 2020

Form Preview

Your Details

* indicates a required field

You are required to provide information about your organisation and your project. The contact information provided within this section will form part of your funding agreement and all future correspondence for this funding round if you are successful.

Applicant

Applicant Organisation *

Organisation Name

Applicant Postal Address

Address

Application Contact

Application Contact *

Title

First Name

Last Name

Application Contact Position *

Application Contact Mobile Phone Number *

Must be an Australian phone number.

Application Contact Primary Email *

Must be an email address.

AUTHORISED SIGNED

Is the application contact an Authorised Signee *

☐ Yes

☐ No

An Authorised Signee is someone who is authorised to sign funding documents on behalf of the organisation.

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Authorised Signee 1

This section is not applicable because of your response to question: "is the application contact an Authorised Signee?"

Authorised Signee 1 *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Authorised Signee 1 Position *

Authorised signee must be either a President, CEO, Director, Secretary, Treasurer or a Senior Role within the applicant organisation.

Authorised Signee 1 Mobile Phone Number *

Must be an Australian phone number.

Authorised Signee 1 Primary Email *

Must be an email address.

AUTHORISED SIGNED 2

Please specify a second Authorised Signee for this application

Authorised Signee 2 *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Authorised Signee 2 Position *

Authorised Signee 2 Mobile Phone Number *

Must be an Australian phone number.

Authorised Signee 2 Primary Email *

Must be an email address.

Remember! Save your application before moving to the next page.

Auspice Details

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* indicates a required field

Groups that are not incorporated are still eligible to apply for funding but must do so by identifying an incorporated association to auspice their project.

**Is your project being
auspiced? ***

Auspice Organisation

Auspice Organisation *

Organisation Name

Auspice Postal Address

Address

Auspice Authorised Signee

Auspice Authorised Signee *

Title First Name Last Name

Auspice Authorised Signee Position *

Auspice Authorised Signee Primary Phone Number *

Must be an Australian phone number.

Auspice Authorised Signee Primary Email *

Must be an email address.

Remember! Save your application before moving to the next page.

Incorporation and Insurance

* indicates a required field

Incorporation, ABN and Insurance

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Incorporation Number *

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.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Attach Public Liability Insurance Certificate (minimum \$10million)

Attach a file:

Incorporation, ABN and Insurance (Auspicing Organisation)

Being Auspiced? If you have nominated an auspice organisation, enter their details in this section.

Incorporation Number *

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.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	

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Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

Attach Public Liability Insurance Certificate (minimum \$10million) *

Attach a file:

Remember! Save your application before moving to the next page.

Project Details

* indicates a required field

Project Title *

Brief description of Project *

Word count:

(Must be no more than 100 words).

Project Idea (60%)

Your '*Project Idea*' will be assessed using the **Assessment Criteria** found in the grant guidelines.

What is the aim of your project? *

Word count:

(Must be no more than 50 words).

How has COVID-19 impacted your group and how will this project address the impact?

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Describe the outcomes and environmental benefits of the project *

Word count:
(Must be no more than 100 words).

How does your project contribute to the achievement of the objectives outlined in the Environmental Sustainability section of the Council Plan 2017-20 (pg18)? *

Word count:
(Must be no more than 100 words).

Does the project provide a resource or cost saving to the group? *

Word count:
(Must be no more than 100 words).

How does your project demonstrate innovation to set an example for others? *

Word count:
(Must be no more than 75 words).

Project Delivery (40%)

The '*Project Delivery*' will be assessed using the **Assesment Criteria** found in the grant guidelines.

Who will carryout the project? *

Word count:
(Must be no more than 100 words).

How does you project address social inclusion? (Describe how your project engages with our diverse community). *

(Being 'inclusive' means welcoming everyone – regardless of age, gender, race and ability and that all people involved have an equal opportunity to participate at a level they choose).

Have other potential funding sources been explored? *

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Word count:

Must be no more than 50 words

Project Timeline

In the table below, please provide a timeline for the delivery of your project including:

- The action / activity planned.
- The skills / resources required for each action.
- Estimated start and completion date of each action.

Please remember to also include any community engagement activities you have planned in relation to your project.

Action / Activity	Skills / Resources required	Start Date	Completion Date
		Must be a date	Must be a date

Remember! Save your application before moving to the next page.

Budget

Instructions

Your budget is an important part of your grant application and will be assessed against the [Assessment Criteria](#) outlined in the grant guidelines.

The assist you to complete your budget correctly we have developed [Budget Instructions](#) for you, including:

- What is project or event expenditure and income?
- How to complete your budget
- Budget examples
- What is & how do I calculate in-kind contribution?

Project Costs (Expenditure)

- List **all costs** associated with your project.

Item	\$
	\$
	\$
	\$
	\$

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	\$
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What specific project items would be paid for using the grant funds? (List below)

Quotes

Remember!

- Two quotes are provided for any single expenditure items of \$1,000.
- Quotes must be less than 3 months old.

Item	Quote

Project Income

Please ensure your Expenditure and Income TOTALS **are the same**.

Income Source	\$
Mildura Rural City Council Grant	\$
Organisation Cash Contribution	\$
In-Kind Contribution	\$

Grant Amount Requested

Total Amount Requested

\$

(What is the total financial support you are requesting in this application?)

Remember! Save your application before moving to the next page.

Applicant Declaration

* indicates a required field

Further Information

Additional information and / or documentation in support of your project (eg. site plans / drawings, photos, letters of support etc) can be uploaded below.

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Attach a file:

Our Privacy Statement

Mildura Rural City Council collects Personal and/or Health Information for municipal purposes as specified in the *Local Government Act 1989*. The information collected in this form is used only for the purposes specified (primary purpose) and is not passed on to third parties. Council may disclose this information but only if authorised or required by law. Council may not be able to process your request unless sufficient information is given. Should you need to change or access your personal details, or you require further information regarding Council's Privacy Policy please contact Council's Privacy Officer.

Acceptance of Privacy Statement * ☐ Yes

Applicant Declaration

I, the undersigned, certify that I have been authorised by my Organisation and Auspice Organisation (if applicable) to submit this application.

I have read, understood and agree to the terms and conditions of this grant.

I have completed all sections of the applicaiton and to the best of my knowledge all the information I have given is true and correct.

I agree that Mildura Rural City Council, for the purpose of assessing this applicaiton, may check any of my statements.

I understand that this is an application and may not necessarily result in funding approval.

Acceptance of Declaration *
☐ Yes

Full Name *

Position *

Date *

Must be a date

I would like to receive information about future grant rounds *
☐ Yes ☐ No

