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ABN 36 670 364 373

COMMUNITY GRANTS SCHEME APPLICATION FORM

Applications Close 5pm August 16th 2019

RECORD NO:
FILE NO : 7.41.6

1. Name and address of organisation undertaking the project

Organisation name _____

Postal Address _____

Does your organisation have an ABN?

Yes

Please provide ABN

No

Please complete "Statement of Supplier" form

Is your organisation registered for the GST?

Yes

No

2. How many members does your club or organisation have?

3. Have you received Community Grant funding previously?

Yes

No

4. If your organisation is a sporting club, have you registered with the StarClub?

Yes

No

lifestyle location of choice

5. Contact Person's details ~ for enquiries relating to the application

Full name _____

Position in Organisation _____

Day Time Contact:

Telephone _____ Mobile _____ Fax _____

Email _____

6. Description of the project ~ what do you want to do?

7. What are the project's goals and objectives ~ what are you trying to achieve?

lifestyle location of choice

8. How will you implement the activity, program or project?

9. How will this project benefit the participants of the broader Copper Coast community?

10. How will you know if you have achieved your goals and objectives? How will you measure the success or otherwise of the projects?

lifestyle location of choice

11. Other comments in support of your application

12. Priority Criteria

Please explain how your activity, program or project addresses one or more of Council's objectives as listed below.

Objectives:

- To promote and improve community harmony by supporting initiatives that address the diversity of social, cultural and recreational needs in the community and maximise the access and usage of community facilities and services.
- To stimulate the communities of the Copper Coast Council through the provision of seeding grants to assist in the piloting or establishment of projects and services to meet community needs.
- To increase opportunities for participation in the community.

lifestyle location of choice

13. Budget

Please provide a detailed budget for the project or program. Your budget must include full details of all expenses plus all sources of income for the project. Particulars about in-kind support should be included. (In kind labour means: if your members provide voluntary hours towards the project you can include those hours eg: 30 hours @ \$30/hour, and this will count towards the cost of your project and so increase the amount of grant you may receive)

Council grants are to a maximum of \$5,000 (\$10,000 in some specific cases). Up to \$1,000 do not require matching funds from the applicant; however grants from \$1,001 to \$5,000 require matching dollar for dollar. Grants over \$5,000 will require two dollars matched for every dollar from Council.

	Description	Cost	Total
	Project Staff Wages		
	Materials		
	Contractors		
	Equipment Hire		
	Advertising / Printing		
	Photocopying		
	Venue Hire		
	In Kind Labour		
	Other		
	Total		

Less Income

	Total Income		
	Grant Required		

lifestyle location of choice

14. Have you applied to other funding bodies for assistance with this project?

Yes No

If **Yes**, please provide the names(s) of the funding body or agency, the amount (s) requested, the purpose of the funds and if they have already been granted.

15. About your organisation

Is your organisation a not for profit community group / organisation? Yes No

Is your Organisation, Group or Association Incorporated? Yes No

If **No**, it is essential that the following section be completed by the incorporated body that will take legal and financial responsibility for the administration of the grant.

Name of Sponsor Organisation

Address

ABN

Agree's to take legal and financial responsibility for the administration of any approved grant funds on behalf of

Should the application be successful the grant funds can be forwarded to our organisation via:
Council preference is via EFT

Cheque

Electronic Funds Transfer BSB A/C No.

Signed

 Position in Organisation

Name

 Telephone

lifestyle location of choice

16. Payment for successful grant applications

Should your grant application be successful, the Copper Coast Council can provide an optional payment by Electronic Funds Transfer (EFT). Grant funds paid by EFT will be deposited into your nominated bank account automatically, eliminating the need to wait for a cheque to clear. A remittance advice confirming the details of the EFT payment will be forwarded to you either by mail or email. Successful applicant organisations that are not incorporated will have their grant funds paid to their sponsor organisation.

If you nominate the EFT option, an EFT Payment Request Voucher will be forward with your grant approval letter. You or your sponsor organisation will be required to complete this form and return to Council. Bank details will be stored electronically in a confidential file used by Finance staff only.

17. Conditions of the Grant

On behalf of

(Applicant organisation)

We, being the authorised officers of the organisation making this declaration, confirm and agree to the following:

- (a) The information given in this application, including any attachments hereto is true and correct in every particular.
- (b) That moneys received from the Copper Coast Council will be spent on the approved activity and as outlined in the project grant application. The Council must approve any changes to the project.
- (c) That moneys provided by the Copper Coast Council under the Community Grants Program will be spent by the applicant organisation within 12 months of receiving the grant funds, unless otherwise negotiated.
- (d) Any moneys not expended on completion of the project will be returned to the Council.
- (e) To acknowledge Council's funding of the project in any publicity or promotion.
- (f) To provide the Copper Coast Council with a written project evaluation report within three months of the completion date of the project.
- (g) To provide the Council with a financial statement, certifying that moneys have been expended in accordance with the grant approval within three months of the completion date of the project. Sponsored applicants will need to obtain this report from their auspicing organisation.
- (h) That failure to comply with these conditions may preclude our organisation from accessing further grant funds in the future.
- (j) That, if you club is operating from licensed premises, we will also agree to join the "Good Sports Program" and support responsible alcohol consumption.

To be signed by two signatories on behalf of the applicant organisation.

lifestyle location of choice

18. Documentation Checklist

Attached is:

- Any support documentation (documentation should be kept to a minimum of 2 pages unless otherwise negotiated)
- The most recent Certified Financial Statement detailing, income and expenditure, assets and liabilities. (your application will not be processed without a Financial Statement signed by your auditor or treasurer)
- Quotes for any capital purchases (if applicable)

Return this application to:

Katrina Borlace
Director Corporate & Community Services
Copper Coast Council
PO Box 396
51 Taylor Street,
KADINA SA 5554

Signed _____ Position held _____

Name _____ Date _____

Signed _____ Position held _____

Name _____ Date _____

Enquiries: Katrina Borlace
Phone: 8828 1200
Fax: 8821 2736
Email: info@coppercoast.sa.gov.au

