Introduction

* indicates a required field

Council's Community Facilities Grant provides funding up to \$30,000 per application. A minimum 25% cash contribution of the grant amount being requested is required for this grant. Before starting this application form, you should have read the Community Grants Program Guidelines.

Late applications will not be accepted. Failure to include all information requested may result in the application being ineligible for funding.

Please note that most fields in this form are mandatory and if not completed your form will not be able to be submitted. An error message will highlight which questions require completion.

All documents attached in this application must be clearly labelled to ensure they are easy to locate, open and view.

Privacy Notice

City of Moreton Bay is collecting your personal information for the purpose of assessing your funding application and/or finalising your funding application requirements. Council will use your personal information to update Council's customer information records and to contact you about other functions and services of Council. Your information will not be given to any other person or agency unless you have given us permission or we are required by law.

If you contact us throughout the application process, please quote the application ID below.

Application ID This field is read only.

Confirmation of eligibility

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. Before proceeding, please confirm the following:

- I have read and understood the <u>program guidelines</u>;
- Our organisation is an eligible entity type for this grant as listed on page 8 of the guidelines;
- The community facility is in the City of Moreton Bay;
- Our organisation is able to provide recent audited or verified financial statements;
- Our organisation does not have any outstanding debts to Council;
- Our organisation does not have any overdue acquittal reports due to Council;
- Our organisation has \$20 million public liability insurance for the project;
- We have discussed and received support from the organisation's management committee or board for this funding request;

• Our organisation has consent of the land owner to undertake this project (not required for Council lessees undertaking planning projects).

The statements above are true and correct * O Yes, I agree to the above
If you are unable to agree to the above statements, you are not eligible for this grant.
Contact details
* indicates a required field
Applicant details
Organisation name * Organisation Name
Official entity, group or organisation name (no acronyms). Please ensure your organisation name is the same as the name on your ABN Lookup.
Organisation street address Address
Organisation postal address Address
If entering a PO Box address, start by typing in the PO Box, click "Can't find your address?" and then manually enter the postal address.
Organisation website or social media page
Must be a URL.
What type of not-for-profit eligible organisation are you? * Incorporated association Registered charity
O Company limited by guarantee (that is not a registered charity)
Is the organisation one of the following? * O School or affiliated parents' association O Kindergarten or child care organisation

Church

Political groupGovernment departme	nt or agency		
 Unincorporated organis 			
 None of the above 			
Proof of not-for-profit s Attach a file:	tatus *		
recedit a me.			
E.g. certificate of incorporation	n or constitution		
Based on the above res	ponse, the organi	sation is ineligible	to apply for this
grant. Please refer to p	age 8 of the Comr	nunity Grants Prog	ram Guidelines for
applicant eligibility or c (07) 3205 0555 to discu			artnerships Unit on
IF SUBMITTED, THIS AP	PLICATION WILL N	OT BE CONSIDERE	D AND NO FURTHER
NOTIFICATION WILL OC	CUR.		
Does the organisation h	ave an ABN? *		
○ Yes○ No			
0 110			
A I' I ADAL *			
Applicant ABN *			
The ABN provided will be u	ised to look up the f	ollowing information	Click Lookup above to
check that you have enter			Click Lookup above to
Information from the Austral	an Business Register		1
ABN			
Entity name			
ABN status			
Entity type			
Goods & Services Tax (GST)			
DGR Endorsed			
ATO Charity Type	More informat	<u>cion</u>	
ACNC Registration			
Tax Concessions			

Contact for application

Main business location

Contact name *	Last Name		
First Name	Last Name		
Position in organisa	tion *		
Phone number *			
Must be an Australian ph Including area code.	one number.		
Email address *			
Where possible, please p than a personal address.		address (e.g. <u>president@</u>)	ourclub.com.au) rather
Project details			
* indicates a required t	field		
Project title *			
Word count: Must be no more than 15 The title should be short			
Provide a short desc	cription of what the	organisation plans to	o do *
Word count:			
What are you planning to	do and why? (Maximum	150 words)	
Street address when	re the project will be	e delivered *	
Charact (in alreading a property of) and and a section and a section	and a manifest	
Street (including number), suburb, state and post	code required.	
Anticipated project	start date *		
Anticipated project	end date *		

Please refer to the eligible Project start dates on page 7 of the <u>Community Grants Program Guidelines</u>.

 Which of the following best describes the proposed project? * Facility Planning Project - Council lessee Facility Planning Project - non Council lessee Facility Improvement and / or Construction Project
Facility Planning Project (select all that apply) ☐ Preparing concept plans and/or construction drawings ☐ Preparing and lodging a development application ☐ Engaging a building certifier ☐ Other:
For Council lessees applying for facility planning projects, an Improvement Works Application consent letter is NOT required.
Facility Improvement and / or Construction Project (select all that apply) Construction of outdoor areas Air conditioning upgrades Installation of security systems Upgrades to fixed audio/visual systems Installation of solar panels Bathroom upgrades Kitchen upgrades Power upgrades Other:
Landowner's consent will be required for this project and can be uploaded on Page 6.
Assessment questions
Please refer to the Assessment Criteria on page 11 of the Community Grants Program Guidelines when answering the questions in this section.
Why is the project needed? *
Who needs this project and why? How was this need identified? What evidence do you have (data, testimonials etc) to confirm this need?
Who will benefit from the project? *
How will the project benefit your organisation and / or City of Moreton Bay residents?

How does the project contribute to one of the priorities for this grant? *

Respond to at least one of the gra	nt priorities on p	age 6 of the Guid	elines.	
What will be the impact on	your organis	ation if you do	on't get this grant? *	
Focusing on inclusion				
Through this grant program, we representation of the following		ed to improving	engagement and	
Will your project specifically ☐ Aboriginal and Torres Strait peoples		of the following ☐ Women and		oups? *
☐ Culturally and Linguistically peoples	Diverse	☐ Young peop	ole	
 □ People with disability □ People who identify as LGB1 No more than 3 choices may be seen 		☐ Older peopl☐ None of the		
How will the project benefit Project plan	this / these	specific group	/s? *	
What are the major stages/step If you require more rows click t		•		need
please ensure you remove the		-	ia mere rews man year	
Stage	Completion o	late	Notes	
	Provide approxi Must be a date.	mate date.	Add explanatory notes if	required
Project risks				
Describe any / all of your projects risks, hazar	ds and barriers *	Describe what you wi	ll do to address these risks *	
This might include: bad weather, f strategic or reputational risks, inju supplier delays etc		alternate supplie	de: factoring in project del ers, impacts on service del ing from temporary premis	livery

CMB Community Facilities Grant Application 2024/25

Project outcomes

Outcomes

Please tell us at least one outcome you expect from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct or indirect) of your project.

Immediate outcomes occur directly following project completion, medium-term outcomes are those that fall between the short and long-term outcomes and long-term outcomes are those you expect to see later.

Below are example outcomes for installing solar panels on a clubhouse roof:

- Immediate outcome decrease in the cost of using electricity during the day.
- Medium-term outcome electricity cost savings of over \$2,000 over 6-12 months.
- Long-term outcome reinvestment of energy savings into purchasing of new equipment.

If you require more rows click the add more button. If you add more rows than you need please ensure you remove them before submitting.

Your outcomes	Timeframe

Project budget

Project income

- Include all income sources including the grant amount being requested and applicant contribution
- If you require more rows click the add more button. If you add more rows than you need please ensure you remove them before submitting.
- Applicant cash co-contribution must be no less than 25% of the Council grant amount being requested.

Example budgets [PDF 872.1kB]

GST Information

- All quotes and project budgets must be GST inclusive.
- An applicant/organisation's GST registration status will not impact the total amount paid if successful.
- Click here for an online GST calculator to assist with your budget.

Income description	Is funding confirmed?	Income amount (A)
		Must be a dollar amount.
Council grant		
Applicant contribution (min. 25% of the grant amount requested)		

Project expenditure

- Item description list each item on a separate line.
- Item cost the total cost of the expenditure item.
- **Grant contribution** the portion of the item cost covered by the grant funding (this may be the same as the **Item cost**).
- **Supplier name** the business supplying the product or service.
- **Quotes** Council will accept up to \$1,000 of project expenses without quotes however, expenses above this amount must have quotes. For example, if you are requesting \$1,600 you must have quotes for at least \$600 worth of expenses.

Refer to page 9 of the <u>Community Grants Program Guidelines</u> to ensure your expenditure items are eligible under this grant.

If you require more rows click the add more button. If you add more rows than you need please ensure you remove them before submitting.

Item description	Item cost (B)	Grant contribution (C)	Supplier name	Quotes
e.g. Plumbing, installation, consultant fees etc.	e.g. \$1,000	e.g. \$800		
	\$	\$		

Budget totals

Total income amount (A)	Total expenditure amount (B)	Income less expenditure (A - B)
\$	\$	\$
This amount is automatically calculated.	This amount is automatically calculated.	This amount is automatically calculated. Income less Expenditure must equal zero.
Total grant amount requested (C)		
\$		
This amount is automatically calculated.		

Supporting documents

* indicates a required field

All documents must be clearly labelled to ensure they are easy to locate, open and view.

Financial statements should be no more than 18 months old and include the following:

- a profit and loss statement (for income and expenditure)
- a balance sheet (for assets and liabilities)
- all mortgages, charges and securities that affect any of your property at the end of the financial year
- a copy of a signed audit report or verification statement from your accountant, auditor or verifier the type of report depends on the size of your association.

To find out more about annual reporting requirements, visit the Queensland Government's <u>Financial responsibilities for incorporated associations webpage</u>.

Most recent audited or verified financial statements * Attach a file:
Current public liability insurance certificate * Attach a file:
Date of expiry of insurance cover *
Must be a date.
Landowner's consent
 For Council lessees applying for facility improvement/construction projects, an Improvement Works Application (IWA) consent letter is required. For Council lessees applying for facility planning projects an IWA consent letter is NOT required. For any queries, contact Council's Community Leasing Team on (07) 5433 2555 or at communityleasing@moretonbay.qld.gov.au. For other applicants, provide a written letter from the landowner confirming consent for the landowner confirming confirming confirming confirming co
the project. Landowner's letter of consent * Attach a file:
Additional documents to support your application
Attachments must be clearly labelled to ensure they are easy to locate, open and view. Additional documents for this grant may include:
Construction drawingsDevelopment approval
Site maps/plansFormal proposals
Minutes of planning meetings
• Letters of support (must be dated and include the contact details of the author)
Attach a file:

Declaration and feedback

* indicates a required field

Declaration

I agree *

○ Yes

This section must be completed by a member of the organisation's management committee or board. This may be different to the contact person listed earlier in this application form.

I declare that to the best of my knowledge the statements made in this application are true and correct, and I understand that if our organisation is approved for this grant, we will be required to accept the terms and conditions of the grant.

Name *			
First Name	Last Name		
Position in organisa	tion *		
Applicant feedbac	ck		
You are nearing the enclick the SUBMIT buttowould rather provide a	on please take a few m	noments to provide son	
Please indicate how Very easy Easy Neutral Difficult Very difficult	you found the onlin	e application proces	S
How many minutes i	n total did it take yo	ou to complete this a	application?
Must be a number. Estimate in minutes i.e. 1	. hour = 60		
Please provide us w additions to the app			
Submit			

INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED. DO NOT SUBMIT THIS APPLICATION UNTIL ALL REQUIRED INFORMATION AND SUPPORTING DOCUMENTS HAVE BEEN PROVIDED.

You are now ready to submit. Read and acknowledge the message below, then click on 'Next page' to review, then Submit. *

O You will receive a confirmation email when your application has been submitted. If you do not receive this email then your application has NOT been submitted. Please ensure all questions have been answered and try again. (Check box here to acknowledge that you understand this)