

ANNUAL GRANTS PROGRAM 2012/2013 APPLICATION FORM

SECTION 1 – APPLICANT DETAILS

Name (Organisation / Individual)			
Postal Address			
Contact Person			
Contact Numbers	Phone	Fax	Mobile
Email Address			
Organisation Status	<input type="checkbox"/> Individual <input type="checkbox"/> Incorporated Entity <input type="checkbox"/> Charitable Institution <input type="checkbox"/> Other (you will require an organisation with legal status to sponsor your application or provide other supporting documents)		
Registered for GST?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
ABN			
Brief Description Of Activities You or Your Organisation Undertakes			

OFFICE USE ONLY

Responsible Officer to sign and date each step

Date Application Received:

Acknowledgment Letter sent:

Notification Letter:

Tax Invoice / Invoice / Statement by a Supplier (circle) Received:

Chq Req Form Completed:

SECTION 2 – PROJECT DETAILS

<p>Grant Category</p> <p>Select only one</p>	<p><input type="checkbox"/> Arts, Culture & Heritage</p> <p style="padding-left: 20px;"><input type="checkbox"/> Arts and Cultural</p> <p style="padding-left: 20px;"><input type="checkbox"/> Local Heritage</p> <p><input type="checkbox"/> Community Health & Wellbeing</p> <p style="padding-left: 20px;"><input type="checkbox"/> Sporting & Cultural Facilities</p> <p style="padding-left: 20px;"><input type="checkbox"/> Community Programs & Projects</p> <p><input type="checkbox"/> Connected Rural & Urban Communities</p> <p style="padding-left: 20px;"><input type="checkbox"/> Rural Halls</p> <p style="padding-left: 20px;"><input type="checkbox"/> Neighbourhood & Rural Village</p> <p><input type="checkbox"/> Tourism Event Attraction & Marketing</p> <p><input type="checkbox"/> Sustainable Environments</p> <p><input type="checkbox"/> Developing Personal Excellence</p>		
<p>Project Name</p>			
<p>Brief Project Description</p> <p>What are you going to do?</p>			
<p>When are you going to do it?</p>			
<p>Where are you going to do it?</p>			
<p>Start Date</p>		<p>Finish Date</p>	
<p>Amount of Grant Requested</p>	<p>\$</p>	<p>Total Project Cost</p>	<p>\$</p>

How does your project address the Vision 2030 Future Directions and the Funding Priorities for your selected grant category? Each category has specific purpose and funding priorities. Refer to the 2012/13 Grant Guidelines.

Who will benefit from your project?

What is your objective, what do you think you will achieve?

Who will be involved in your project?

How will you promote your project?

How will you acknowledge Council's contribution toward this project?

SECTION 3 – PROJECT DELIVERY

Project Timeline – write down every step that needs to happen, when it should happen, and who will make it happen.

Task	Time	Person Responsible
<i>Example: Order materials</i>	<i>September – October 2012</i>	<i>President / Secretary</i>
Write up final report/ acquittal (to be done within 8 weeks after the project is completed)		

<p>Council Approvals</p> <p>Does your project require/involve?</p>	<p><input type="checkbox"/> Development Application</p> <p><input type="checkbox"/> Plumbing or Construction Approvals</p> <p><input type="checkbox"/> Works on Council owned Facilities</p> <p><input type="checkbox"/> Use of Council owned Facilities</p> <p><input type="checkbox"/> Traffic Management Plan</p> <p><input type="checkbox"/> Other</p>
<p>Details of Discussion with Council Staff</p> <p>Name of Officer/s</p> <p>Date of Contact</p>	

SECTION 4 - THE PROJECT BUDGET

Please detail the estimated income and expenditure of each item needed to complete your project.		
ALL Amounts to Include GST		
Income <i>Do not include your Council Grant request in this section</i>	Amount	
Your own financial contribution	\$	
Other (please provide detail eg: other sponsorship/grant funding)		
	\$	
	\$	
	\$	
Total Income	\$	
Expenses <i>List the total cost for each component and how it will be funded (attach quotes if available)</i>	Total Cost	Grant Requested From Council
<i>Example: Advertising</i>	\$3000.00	\$1500.00
Total Expenses	\$	\$
In- Kind		
In-Kind Contribution / Volunteer Staff (please provide detail eg: number of staff x hourly rate x number of hours)		<i>What it would cost you to pay someone else to do the job</i>
	\$	

SECTION 5 - DECLARATION

<p>Checklist</p> <p>Please tick to confirm that you have either attached or completed all of the following:</p>	<p><input type="checkbox"/> Incorporation documents, documents verifying the organisation or a letter from a sponsoring organisation (If applicable)</p> <p><input type="checkbox"/> Tax invoice / invoice / statement by a supplier form (whichever is applicable to your organisation)</p> <p><input type="checkbox"/> You have completed any outstanding acquittals from previous rounds of Council grants</p> <p><input type="checkbox"/> Have cleared your project with relevant Council divisions</p>
<p>Declaration</p>	<p>In applying for funds under Councils Annual Grants Program, I:</p> <ul style="list-style-type: none"> • Certify to the best of my knowledge that the statements made in this application are true and correct. • Have read the guidelines and agree to abide by them. • Understand that neither my application form nor any supporting material will be returned to me. • Agree to have Wagga Wagga City Council's logo clearly displayed on all promotional material including newspaper advertisements and television advertisements. • Agree to acknowledge Wagga Wagga City Council's financial contribution in all speeches at openings etc and interviews with the media. <p>Name:.....</p> <p>Signed:.....</p> <p>Date:.....</p>

FEEDBACK TO US	
How did you hear about the Annual Grants Program?	If you needed assistance with your application, where did you find it?
<input type="checkbox"/> Newspaper Advertisement <input type="checkbox"/> Article in Newspaper <input type="checkbox"/> Radio <input type="checkbox"/> Word of Mouth <input type="checkbox"/> Council Newsletter <input type="checkbox"/> Council Website <input type="checkbox"/> Other _____	<input type="checkbox"/> Phoned Councils Customer Service <input type="checkbox"/> Attended Grants Information Workshop <input type="checkbox"/> Councils Website <input type="checkbox"/> Spoke to a Council Officer <input type="checkbox"/> Other _____
OTHER COMMENTS	

HOW TO RECEIVE YOUR PAYMENT

In order for Council to pay your organisation any grant awarded, it is a requirement that an invoice or tax invoice is submitted to Council. The Australian Taxation Office can be contacted for further advice regarding your tax status on 132866 or via their website www.ato.gov.au. The following outlines what needs to be considered when completing either an invoice or tax invoice:

1. Australian Business Number (ABN) and Registered for GST

If your organisation has an ABN and is registered for GST you will need to provide a tax invoice and include GST on top of the amount of grant allocated. For example - if your grant is for \$3000 then your tax invoice would be for \$3000 plus \$300 GST, totaling \$3300. Please quote your ABN on the tax invoice.

2. ABN and Not Registered for GST

If your organisation has an ABN but not registered for GST you will need to provide an invoice for the grant amount (excluding GST), quoting your ABN.

3. No ABN and Not Registered for GST

Council expects that all organizations that receive grant funding to supply an ABN. If your organisation does not have an ABN you will need to provide an invoice for the grant amount (excluding GST) and a completed statement by supplier form.

Please note the invoice/tax invoice must be in the name of your organization - not in the name of the supplier of the goods/services you are purchasing. It will be your responsibility to manage the grant funds and make payment to any suppliers that may be used.

INVOICE

Please complete if you are not registered for GST

Invoice To:	Wagga Wagga City Council PO Box 20 WAGGA WAGGA NSW 2650	Date:	
Claimants Name:			
Claimants Address:			
ABN:			
Description of Goods or Service:	Wagga Wagga City Council Annual Grants Program 2012/13		
Project Name/Title:			
Amount (Excluding GST):			
Payment Method (please tick):	<input type="checkbox"/> Cheque <input type="checkbox"/> Direct Deposit	Account Name:	
		Bank:	
		BSB	
		Acc No:	

**Recipient created
TAX INVOICE**

Please complete if you are registered for GST

Invoice To:	Wagga Wagga City Council PO Box 20 WAGGA WAGGA NSW 2650	Date:	
Claimants Name:			
Claimants Address:			
ABN:			
Description of Goods or Service:	Wagga Wagga City Council Annual Grants Program 2012/13		
Project Name/Title:			
Amount (Excluding GST):			
GST:			
Total Amount:			
Payment Method (please tick):	<input type="checkbox"/> Cheque	Account Name:	
	<input type="checkbox"/> Direct Deposit	Bank:	
		BSB	
		Acc No:	



