

# COMMUNITY GRANTS PROGRAM APPLICATION FORM

## LODGEMENT OF APPLICATION

Post to:  
Chief Executive Officer, Banana Shire Council, PO Box 412, BILOELA QLD 4715

Deliver to any Council Customer Service Centres:  
Biloela – 62 Valentine Plains Road  
Taroom – 18 Yaldwyn Street  
Moura – 43-47 Gillespie Street

Email: [enquiries@banana.qld.gov.au](mailto:enquiries@banana.qld.gov.au)

For further information or assistance in completing the application form, please contact Council's Community Development Section on (07) 4992 9500

## APPLICATION CHECKLIST (Please Tick)

- I have read and understood the corresponding policy and procedures documents.
- All sections of the application form completed.
- Applicant declaration signed and dated.
- Copy of documents verifying organisational status of applicant or sponsoring organisation attached.
- Copy of letter of agreement from sponsoring organisation attached (if applicable).
- Copy of property owner's approval attached (if applicable).
- Copy of current audited financial statements attached (if applicable).
- Copy of Certification of Insurance attached.
- Copies of quotes and supporting documentation attached (if applicable).
- Copy of application retained for applicant organisations records.
- Volunteer operator acknowledgement attached.

## FEEDBACK

How did you find out about the Community Grants Program?

- Local print publication
- Council's website
- Council's Focus newsletter
- My Community Directory email
- Word of mouth
- Other (please specify) \_\_\_\_\_

Did you require assistance from Council to complete this application form?  Yes  No

## DID YOU KNOW ABOUT

Banana Shire Council provide a Community Calendar and Community Directory to help promote your organisation and events. Both tools are FREE for the community to utilise. Access them at [www.banana.qld.gov.au](http://www.banana.qld.gov.au)

**COMMUNITY DIRECTORY**  
The Community Directory enables quick and easy access to a list of organisations, clubs and service providers across the Shire.

**COMMUNITY CALENDAR**  
The Community Calendar is available to advertise upcoming events, meetings, workshops and more.  
For more information email [enquiries@banana.qld.gov.au](mailto:enquiries@banana.qld.gov.au) or phone Customer Service on (07) 4992 9500

|   |   |                                  |
|---|---|----------------------------------|
| <b>APPLICANT<br/>DETAILS</b>  | Is your organisation incorporated? <input type="checkbox"/> Yes <input type="checkbox"/> No   |                                  |
|   | (If no, please provide details below of your sponsoring organisation. Sponsoring organisation will take financial and legal responsibility for any funds granted. A letter of agreement from your sponsoring organisation must be attached).  |                                  |
|   |   | <b>Applicant Organisation</b>    |
|   |   | <b>Sponsoring Organisation</b>   |
|   | Name  |                                  |
|   | Postal Address  |                                  |
|   | Street Address  |                                  |
|   | Contact Person  |                                  |
|   | Phone No  |                                  |
|   | Email Address   |                                  |
| Website   |   |                                  |
| ABN (if applicable)   |   |                                  |
| Is your organisation GST registered? <input type="checkbox"/> Yes <input type="checkbox"/> No   |   |                                  |
| If your organisation is registered for GST and in the instance that this application is successful, is your organisation prepared to issue a Tax Invoice for the GST inclusive amount approved by the Council? <input type="checkbox"/> Yes <input type="checkbox"/> No |   |                                  |
| Please enclose a copy of the following documents (where applicable)   |   |                                  |
| <input type="checkbox"/> Certificate of incorporation   |   |                                  |
| <input type="checkbox"/> Latest audited financial statement   |   |                                  |
| <input type="checkbox"/> Letter of agreement from your sponsoring organisation  |   |                                  |
| <b>Optional</b> support material  |   |                                  |
| <input type="checkbox"/> Strategic plan for your organisation   |   |                                  |
| <input type="checkbox"/> Photographs  |   |                                  |
| <input type="checkbox"/> Newspaper articles   |   |                                  |
| <input type="checkbox"/> Other – (please specify) _____   |   |                                  |
| <b>INSURANCE</b>  | Do you have appropriate public liability insurance? <input type="checkbox"/> Yes <input type="checkbox"/> No<br><b>Funds will not be provided to uninsured organisations. Council requires a copy of the Certificate of Insurance to demonstrate eligibility. Please attach evidence.</b> |                                  |
| <b>COMMITTEE<br/>DETAILS</b>  | Please list contact details of Committee/Board Management Members:  |                                  |
|   |   | <b>President / Chairperson</b>   |
|   |   | <b>Vice President / Director</b> |
|   | Name  | Name                             |
|   | Phone   | Phone                            |
|   | Email   | Email                            |
|   |   | <b>Secretary</b>                 |
|   |   | <b>Treasurer</b>                 |
| Name  | Name  |                                  |
| Phone   | Phone   |                                  |
| Email   | Email   |                                  |

|   |   |                                  |                         |             |
|---|---|----------------------------------|-------------------------|-------------|
| <b>PROJECT/<br/>EVENT<br/>DETAILS</b>   | Project/Event Name:   |                                  |                         |             |
|   | Request Type – Definitions listed in Community Grants Policy (please select one or more of the following options):  |                                  |                         |             |
|   | <input type="checkbox"/> Financial <input type="checkbox"/> In Kind Assistance <input type="checkbox"/> In Kind Assistance with volunteer Council operator  |                                  |                         |             |
|   | Grant Round: <input type="checkbox"/> January <input type="checkbox"/> April <input type="checkbox"/> July <input type="checkbox"/> October   |                                  |                         |             |
|   | Project/Event Start Date:<br><i>(no earlier than 6 weeks after grant round closes)</i>  |                                  | Project/Event End Date: |             |
| Total Project/Event Expenditure: \$<br><i>(This amount must match the total project expenditure listed on page 6)</i> |   | Total Requested from Council: \$ |                         |             |
| <b>PROJECT/<br/>EVENT BRIEF</b><br><br>What / When /<br>Where / How   | Specify what you require from Council and what it is for  |                                  |                         |             |
|   | <b>NOTE:</b> <ul style="list-style-type: none"> <li>• Please note that a specific application form and subsequent indemnity form is required for any requests for temporary road closures or use of Council parks for events. Please contact Council should you require these.</li> <li>• Please make sure you consider everything you will need Council assistance with for your project. All requests must come via this application form and late requests will not be accepted.</li> </ul>  |                                  |                         |             |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
| <b>PLANT AND<br/>OPERATORS</b>  | Provide details of proposed plant and operators required:   |                                  |                         |             |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
|   | Volunteer Council Operator Acknowledgement (All operators to read and sign)<br>I acknowledge that I will be operating the above-mentioned Council plant and equipment as a Voluntary Worker for the above-named applicant. I undertake to operate this plant or equipment in accordance with the conditions of Council’s Community Grants Policy and Procedures and Workplace Health and Safety requirements. <b>I understand that I will NOT be covered by Council’s LGW Workers Compensation cover. I will complete a written risk assessment prior to commencement of any works.</b> |                                  |                         |             |
|   |   |                                  |                         |             |
| <b>Name</b>   |   | <b>Employee Number</b>           | <b>Signature</b>        | <b>Date</b> |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
|   |   |                                  |                         |             |
| <b>PROPERTY<br/>DETAILS</b>   | Where will the project/event be undertaken?   |                                  |                         |             |
|   |   |                                  |                         |             |
|   | Do you have approval from the property owner? <input type="checkbox"/> Yes <input type="checkbox"/> No  |                                  |                         |             |
|   | Property Owner:   |                                  |                         |             |
|   | Property Address:   |                                  |                         |             |
| Please attach evidence of the property owner’s approval for the project/event.  |   |                                  |                         |             |

|   |   |   |
|---|---|---|
| <b>WHO IS INVOLVED</b>  | Who will benefit from your project/event?   |   |
|   | <input type="checkbox"/> Seniors<br><input type="checkbox"/> People with Disabilities<br><input type="checkbox"/> Families and Children<br><input type="checkbox"/> Youth | <input type="checkbox"/> Indigenous People<br><input type="checkbox"/> Culturally/Linguistically Diverse People<br><input type="checkbox"/> Other (please specify)<br>_____ |
|   | Number of participants/beneficiaries:   |   |
|   | Number of volunteers involved:  |   |
|   | What contribution does your organisation/s provide for the project/event?<br>(e.g. Funds, Labour or In Kind Support)  |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
| Are other organisations involved in the project/event? <input type="checkbox"/> Yes <input type="checkbox"/> No<br>(If yes, please provide details including role and level of involvement) |   |   |
|   |   |   |
|   |   |   |
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|   |   |   |
| <b>ABOUT THE APPLICANT</b>  | When was your organisation established?   |   |
|   | How many people does your organisation service annually?  |   |
|   | Please indicate the number of current financial members:  |   |
|   | What are the aims and objectives of your organisation?  |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   |   |   |
|   | How is your organisation funded?  |   |
|   |   |   |
|   |   |   |
|   |   |   |

|  |   |                                |                             |                      |                             |
|--|---|--------------------------------|-----------------------------|----------------------|-----------------------------|
| <b>MEASURING SUCCESS</b>   | How will you measure the success of your project/event?<br>(E.g. Increased membership to your group/organisation; projects completed according to timeline; media coverage; satisfaction surveys)   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
| <b>NEED FOR PROJECT/ EVENT</b>   | Tell us what need exists in the Banana Shire community for this project/event and why Council should provide this assistance (i.e. What are the planned outcomes).  |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
| <b>RECOGNITION</b>   | <p>How will Banana Shire Council's contribution/assistance be acknowledged?<br/>(Please select at least two of the below options)</p> <p><input type="checkbox"/> Print material (e.g. 1 flyers, programmes etc) (1. Use of Council logo must be approved in line with policy)</p> <p><input type="checkbox"/> Newspaper articles.</p> <p><input type="checkbox"/> Plaque provided by Council.</p> <p><input type="checkbox"/> Verbal acknowledgement at opening/during event.</p> <p><input type="checkbox"/> Mayor invited to speak at opening/event.</p> <p><input type="checkbox"/> Council banner displayed at opening/event.</p> <p><input type="checkbox"/> Other (please specify) _____</p> <p><b>NOTE: It's the Applicant's responsibility to contact Council to arrange banners, plaques, logo or invitations to the Mayor, within reasonable timeframes/notice period.</b></p> |                                |                             |                      |                             |
| <b>FINANCIAL DETAILS</b>   | Please provide details of any assistance received from the Banana Shire Council including In Kind Assistance and Rate Relief within the last (2) years  |                                |                             |                      |                             |
|  | <b>Type of Assistance</b>   |                                | <b>Date Received</b>        | <b>Date Acquired</b> | <b>Amount Received (\$)</b> |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
| Have you received funding or are you currently applying for financial assistance from any other funding body? (Please attach copies of written confirmation of funding commitment from other partners) |   |                                |                             |                      |                             |
| <b>Name of Partner/Funding Body</b>  |   | <b>Amount Applied for (\$)</b> | <b>Amount Received (\$)</b> |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |
|  |   |                                |                             |                      |                             |



|                       |   |           |
|-----------------------|---|-----------|
| <b>DECLARATION</b>    | <p>To be signed by an <b>Executive Member</b> of the applicant organisation or sponsoring organisation</p> <p>I, being the authorised officer of the organisation making the declaration, confirm and agree that:</p> <ol style="list-style-type: none"> <li>1. The information given in this application, including any attachments hereto is true and correct in every particular.</li> <li>2. I am authorised by the applicant organisation to prepare and submit this application.</li> <li>3. If funds are granted by Banana Shire Council, they will be spent on the approved project/event.</li> <li>4. I understand that if Banana Shire Council approves funding or assistance, I will be required to accept the terms and conditions as detailed in the Community Grants policy and procedures.</li> <li>5. Any funds not expended on the completion of the project/event will be returned to Banana Shire Council.</li> <li>6. I will supply a financial acquittal including receipts and evidence of compliance with any conditions set upon approval of the application within six (6) weeks of the project/event concluding.</li> <li>7. If our application is approved, Banana Shire Council's contribution will be acknowledged in any publicity/promotional material published for the approved project/event and will adhere to Council's guidelines for use of the logo. Where appropriate, Council will provide a plaque to be fixed to any tangible items.</li> <li>8. I understand that Banana Shire Council does not accept any liability or responsibility for the outcome of this project/event.</li> <li>9. All necessary approvals/permits are obtained prior to the commencement of the project/event.</li> <li>10. Further details may be sought concerning this application from the contact person nominated in this application, and that the nominated contact person is specifically authorised to respond to all such requests from Council.</li> <li>11. I will provide appropriate insurance to cover the proposed project and abide by all relevant health and safety standards.</li> </ol> |           |
|                       | Name:   | Position: |
|                       | Signature:  | Date:     |
| <b>PRIVACY NOTICE</b> | <p>Banana Shire Council is collecting your personal information to process your application. The information will not be disclosed to any other person or agency external to council without your consent, unless required by or authorised by law. Personal information will be handled in accordance with the <i>Information Privacy Act 2009</i>. Program application details (including applicant organisation name and amount funded) will be published by Council and summarised in Council's annual report.</p>  |           |