

Equipment Grant Application Form - 23/24

Form Preview

Equipment Grant Application Form

Equipment Grants of up to \$2,000 per year are available to not-for-profit organisations, incorporated groups, or social enterprises in the delivery of their programs and services with urgent or necessary purchases that enhance the health, wellbeing and safety of our community at a local level.

Community Grants Guidelines

All grants are subject to availability of funds and eligibility requirements

Who can I talk to?

Community Grants Officer

grants@cityofpae.sa.gov.au

Telephone 8405 6600

A submission of an online application for the City of Port Adelaide Enfield's grants programs is an acknowledgement that applicants will abide by the conditions of any grant approval.

Who are you & how do we contact you?

* indicates a required field

Your details *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Organisation you work for *

Organisation Name

Your position within the Organisation *

Your Phone Number *

Where the number is not a mobile please put "08" at the beginning to help with validation.

Organisation Postal Address *

Address

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Organisation Website

Finance staff email address

Most likely to be your Finance department administration email address or your Treasurer.

Is your organisation or group not for profit? *

Yes No

Only not for profit organisations are eligible to apply for funding

Is your organisation or group incorporated? *

Yes No

If your organisation or group is not incorporated it is essential that you confirm that you understand the risks associated with being an unincorporated group and wish to submit without an auspicing body

Reason for seeking a grant

* indicates a required field

What do you want to purchase? *

When does the purchase need to be made? *

Where will the purchase be kept? *

Address

This must be within the City of Port Adelaide Enfield Council area in order to be eligible.

Who are the expected primary beneficiaries of this project/program? *

Please select from the list who the main group is that will benefit from the purchase

Why is this purchase urgent or necessary? *

Word count:

Must be no more than 220 words.

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This question relates to the assessment 'The application demonstrates that the purchase is urgent or necessary' which has a 50% weighting

Why do you need the purchase? *

Word count:

The application must demonstrate evidence and or clear reasons for why the purchase is important for PAE residents. This relates to 50% of the weighted criteria.

How will this purchase support community wellbeing? *

Word count:

Describe the specific community health and wellbeing benefit and/or impact of the purchase. This should relate to the need for such a purchase and how the community identified this need (no more than 200 words). This relates to 30% of the weighted criteria.

How can you demonstrate reasonable and proportional contribution (in kind, material or financial) *

This question relates to 20% of the weighted criteria

Let's talk dollars

* indicates a required field

Costs

What is the total cost for the purchase? *

What is the total budgeted cost (dollars) of your purchase?

How much do you need from Council? *

Maximum of \$2000

Please upload a quote for the purchase *

Attach a file:

the amount you are requesting must be either the same value as the quote or more. Please ensure to give the document a name so we know what it is.

Do you need additional money to Council's grant? *

Other grants

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How much have you applied for OR how much will you apply for? *

\$
Must be a dollar amount.

Has it been approved? *

Yes No

Date of approval OR when do you expect to be notified? *

Must be a date.

Please upload the approval letter they sent to you *

Attach a file:

If you have not been approved. Please upload your application form that you submitted to the other funder. Please ensure to give the document a name so we know what it is.

Australian Taxation Office Requirements

Does the Applicant organisation have an Australian Business Number? *

Yes No

If you answer no to this question you must complete and attach a copy of a Statement by a Supplier form. The Entity name registered with the ABN MUST be the same name that the bank account name.

Please upload your most recent Audited Financial Statement *

Attach a file:

Bank Statements will NOT be accepted. If your organisation or community group is not required to provide audited financial statements as part of your incorporation, please upload your financial statement completed by your treasurer. The treasurer's report is the one that is presented at your AGM. An annual general meeting (AGM) is a meeting of all the members of an incorporated association which must be held once during each calendar year. The annual general meeting must be convened in accordance with the law, using the procedures in the organisation's rules. The Associations Incorporation Act 1985. If you are a newly established incorporation, you will have 18 months to hold your first AGM. Please ensure to give the document a name so we know what it is.

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

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ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Statement by a Supplier form

[Statement by a Supplier form can be downloaded from the ATO website here](#)

If applicant does not have an ABN please upload a completed Statement by a Supplier form the Australian Taxation Office (ATO) *

Attach a file:

Please ensure to give the document a name so we know what it is.

Unincorporated groups

An unincorporated group is not recognised as a separate legal entity and is considered to be just a group of individuals acting on a common interest. This means that members of the group, and in particular the committee members, are **personally liable** for the group, including the group's debts, contracts and insurance claims. The individual members may still remain liable for the group's actions after a member resigns if their name still appears on any contract, lease or bank records.

Please confirm that you understand the risks associated with being an unincorporated group and still wish to submit without an auspicing body *

Yes, I understand the risks and would like No, I wish to seek an auspice for my grant to proceed as an unincorporated group

Bank details

Council's payment method is only by Electronic Funds Transfer (EFT). **Council will not provide cheques.** Grant funds will be automatically deposited into the following nominated account and must be in the name of the **applicant** who accepts the Terms and Conditions section of this application form.

Bank or Credit Union Name *

Bank Account

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

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Terms & Conditions

* indicates a required field

I, being the authorised officer of the organisation making this declaration, confirm and agree to the following:

1. That failure to comply with these conditions may preclude our organisation from accessing further grant funds in the future.
2. To abide by the conditions under which the City of Port Adelaide Enfield may approve funding of this request.
3. To submit an evaluation report and acquittal to Council, no more than **four weeks** after the purchase is made.
4. I certify that the statements and information provided (including attachments) in this application are true and correct in every particular.
5. I confirm that I have read and understood the conditions for funding as outlined within and accept and agree to abide by the conditions.
6. I also agree to acknowledge Council's funding of the project in any publicity or promotion.
7. I further agree that monies received from the City of Port Adelaide Enfield will be expended within 12 months as outlined in this application and in accordance with Council's approval letter. Any monies not expended will be returned to the City of Port Adelaide Enfield.
8. I agree that should my application for funding be approved, Council may provide any information contained herein to the public in any form and/or use this information to promote their grant and sponsorship programs.
9. Any changes to the agreed expenditure of Council's grant funds must be negotiated in writing with Council's Funding & Partnerships Officer.
10. I agree to abide by any Terms and conditions as outlined in the [Community Grants Guidelines](#).

On behalf of the applicant organisation I agree to accept the terms and conditions within *

Yes, I agree

A submission of an online application for the City of Port Adelaide Enfield's Grants & Sponsorship program is an acknowledgement that applicants will abide by the conditions of any grant approval.

In compliance with the *Information Privacy Act 2009* (the Act) personal information on this form may be stored in the City of Port Adelaide Enfield's records database and may also be used for statistical research, information provision and evaluation of services. Your personal information may be provided to the financial institution which handles City of Port Adelaide Enfield's financial transactions and may be disclosed to other agencies and third parties for purposes related to this application and/or monitoring compliance with the Act. Except in these circumstances, personal information will only be disclosed to third parties with your consent unless otherwise required or authorised by law.