

Quick Response Grant Application Form

Form Preview

What do you want to do? *

How will this improve community wellbeing? *

The application must demonstrate the community wellbeing benefit and/or impact. This relates to 30% of the weighted criteria.

Why does the community need this grant? *

Describe why the funding is required for an unexpected or unforeseen need or opportunity. This relates to 50% of the weighted criteria.

Why can't you apply for any other PAE grant program? *

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

This question relates to 20% of the weighted criteria

When will it start? *

When will it finish? *

Where will it happen? *

Address

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

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal - no particularly targeted beneficiaries'

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How much do you need from Council? *

\$

This can be no more than \$500

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

- Yes, application submitted Yes, application still to be submitted No, our organisation will cover remaining costs No, Council grant will cover all costs

Do you think your idea could be scaled up to a larger project grant?

What are you spending the \$ grant money on?

Please upload any quotes you have

<input type="text"/>	\$	<input type="text"/>
<input type="text"/>	\$	<input type="text"/>
<input type="text"/>	Must be a dollar amount.	<input type="text"/>

Other grants

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

\$

Has it been approved? *

- Yes No

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

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 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

Applicant ABN *

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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	
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 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 person completing the Terms and Conditions section of this application form.

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Bank or Credit Union Name *

Account details *

Account Name

BSB Number

Account Number

Email address where the remittance advice should go?

does anyone else need to know that money has been deposited into this account? please provide their email address so we can let them know.

Terms & Conditions

* indicates a required field

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.

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 acquittal to Council, no more than **four weeks** after the completion of the project.
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](#).

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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.