

Creative Industry Grant - Application Form

Form Preview

Introduction

* indicates a required field

The City of PAE's Creative Industry Grant program aims to support creative practitioners of all disciplines to grow their practice and deliver projects that contribute to PAE's vision for a strong, creative, impactful and sustainable arts ecology.

This program supports many creative practices including visual arts and crafts, music, film, literature, performance and experimental arts.

Please note:

- 1. Applicants must complete all sections of this application form and attach relevant documentation to this application to be eligible to be funded.**
- 2. All grants are subject to availability of funds, eligibility and assessment requirements.**
- 3. 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.**

Please read the [Creative Industry Grant Information Sheet](#) carefully before submitting an application.

Who can I talk to?

Arts & Culture Coordinator

arts@cityofpae.sa.gov.au

08 8405 6600

Assessment

All online applications will be assessed on comparative merit after each round has closed. Applicants will be notified of the outcome within four weeks of the round closing date.

Applications will be assessed by City of PAE staff against the criteria outlined in the [Creative Industry Grant Information Sheet](#).

The decision of awarding grants will be made by City of PAE staff with appropriate delegations.

Applicant Eligibility Criteria

Before submitting your application, please check that you meet the eligibility criteria - all boxes must be ticked for your event to be eligible for funding.

*

- ☐ Applicant is a legal entity with an active Australian Business Number (ABN)

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- ☐ Applicant lives or works in the City of PAE
- ☐ Applicant can demonstrate benefit to the PAE creative sector
- ☐ Application will only be accepted with a copy of the applicant's public liability insurance (covering the date of the activity) or a quote for public liability insurance attached
- ☐ Applicant has fulfilled all previous grant acquittals and obligations with the City of PAE
- ☐ Applicant is not applying to cover retrospective payments (including where the project or purchase occurred prior to the grant assessment)
- ☐ Applicant is not applying to cover budget deficits, fundraising activities, or costs associated with the running of an organisation/business (eg. administration costs or overheads, operational costs, utility bills, etc.)
- ☐ Applicant has taken into account any permits relevant to the application*

*Permits can include PAE's [Application for Events on Reserves & Roads](#) or [Application for Filming Media Productions](#)

Applicant Details

* indicates a required field

Applicant Information

Organisation/Applicant Name *

☐ Individual ☐ Organisation
Organisation Name

Title First Name Last Name

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Council's grant funds will only be paid into a Bank Account in this name

Contact Person *

Title First Name Last Name

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Position within organisation

only if applicable

Phone Number *

Please provide the best contact number during business hours

Postal Address *

Address

Suburb State Postcode

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Email *

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Organisation/Applicant Website

only if applicable

Applicant 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.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Applicant Home or Work Address *

Address

The applicant must live or work in the City of PAE to be eligible.

Proposed Project/Activity Details

* indicates a required field

Project/Activity Summary

Project/Activity Title *

Word count:

Must be no more than 10 words.

Short project/activity description *

Word count:

Must be no more than 250 words.

Provide a general overview of the project/activity

Start date *

The proposed project/activity must start at least 4 weeks after this grant application's submission date.

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End date *

The proposed project/activity must be completed within a 12-month period from estimated start date.

Site address where project/activity will take place *

Address

Name of Reserve/Road *

If not in a reserve/road, put N/A

Have you booked the space? *

- ☐ Yes
☐ No
☐ Booking not required - activity is not on Council land
To check availability and booking of a Council property/reserve please visit SpacetoCo at <https://www.spacetoco.com/org/cpae>. If you can't find a suitable space on SpacetoCo, please contact our Bookings Officer at service@cityofpae.sa.gov.au or on 08 8405 6950.

I understand that if a permit is required, I will fill in a permit application *

- ☐ Yes
☐ No
An event permit is required for events held on Council owned land and roads. To learn more about the event permit application please visit <https://online.cityofpae.sa.gov.au/onlineform/events>. Commercial media productions on Council owned land or road will require a media production permit - see <https://www.cityofpae.sa.gov.au/services/apply-for-permit/media-production>

Project/Activity Objectives

How much are you applying for? *

The maximum amount you can apply for is \$5,000. Apply for what you need, it does not need to be the maximum amount available.

In what way does the project/activity contribute to strengthening the PAE arts sector? *

Word count:

Must be no more than 200 words.

Which Council strategic priorities does the project/activity align with? *

- ☐ Developing our region as a vibrant, creative destination known for its arts and culture
☐ Fostering a collaboration and connection between business and the arts

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- ☐ Using arts and culture to develop the night-time economy of our tourism precincts
 - ☐ Activating our streets, laneways and underutilised public, private or commercial places with cultural activity
 - ☐ Creating opportunities for community participation in arts and culture
 - ☐ Delivering arts-based activities that provide cultural, social, economic, environmental and/or health benefits
- Please select as many choices as applicable

Please explain in detail how the project/activity would meet each strategic priority selected in the previous question. *

Word count:

Must be no more than 300 words.

Please address each priority/objective individually.

How does the project/activity support your development as a creative practitioner (or that of your collaborators/partners, if applicable)? *

Word count:

Must be no more than 300 words.

Provide a list of all collaborators or partners involved in your project/activity and the role they will play in its delivery *

Word count:

Must be no more than 300 words.

(ie. artists, facilitators, performers, crew, staff, volunteers, venue, sponsors, collaborating businesses).

Provide a short biography (individual or organisation) of applicant and/or relevant collaborators *

Word count:

Must be no more than 300 words.

Project/Activity Planning, Promotion and Marketing

Will there be any admission fees for your project/activity? *

☐ Yes

☐ No

How much will you charge for admission? *

\$

Must be a dollar amount

How will your project/activity be promoted? *

Word count:

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Must be no more than 250 words.

How will you ensure your project/activity is accessible to a diverse audience (including people with disabilities, culturally diverse, aged, etc)? *

Word count:

Must be no more than 250 words.

How will you know if you have achieved the objectives of the project/activity? *

Word count:

Must be no more than 250 words.

For example customer surveys, local business surveys, community surveys, participant surveys, attendance data. You will need to include this as part of your post-event acquittal.

Grant acknowledgement *

Word count:

Must be no more than 250 words.

Outline how you intend to recognise the support provided by the City of Port Adelaide Enfield.

Please upload a risk assessment for your project/activity *

Attach a file:

If you are unsure or do not have any templates available, a basic template for you to start from is available to download [here](#). The City of Port Adelaide Enfield accepts no responsibility for the development of others' Risk Management documents or procedures. Please ensure to give the document a name so we know what it is.

The type of Public Liability Insurance I am submitting is *

- ☐ Existing Public Liability (covering date of the activity)
- ☐ Quote for Public Liability

Please upload your existing Public Liability Insurance (covering the date of the activity) or a quote for your Public Liability Insurance *

Attach a file:

This is a compulsory requirement and must be to a minimum level of \$20 million. Public Liability Insurance needs to be in the same name as the legal entity applying for the grant.

If available, please upload any other documents to support your grant application

Attach a file:

Budget - let's talk dollars

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* indicates a required field

Project/Activity Budget

Please provide a list of funding sources (including grant amount requested, other grants, financial contribution from applicant or others, in-kind contribution from applicant or others) in the "Income/Funding sources" column.

Please itemise all proposed expenses/purchases (incl GST) in the "Expenditure/ Costs" column.

The total expenditure and total income should be equal. Do not show a profit or loss.

Income/Funding sources (including Council grant monies, in-kind, volunteer hours, other income)

Expenditure/ Costs (including in-kind, volunteer hour costs)

	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

Budget Totals

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income minus Expenditure

\$

This number/amount is calculated.
This number must equal zero

Quotes

Please upload quotes for largest expense items *

Attach a file:

Quotes are critical to ascertain the cost of the proposed activity/purchase. Please note that applications without relevant quotes will not be considered for funding.

Bank Account Details

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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 which must be in the name of the entity applying for this grant.

Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Name of bank account needs to be the SAME as the applicant

Bank or Credit Union Name *

Terms and Conditions

* indicates a required field

I, being the applicant completing this application form, certify that:

- 1.The statements made in this application are true and correct.
- 2.Failure to comply with these conditions may preclude the applicant from accessing further grant funds in the future.
- 3.I agree to abide by the conditions under which the City of PAE may approve funding of this request.
- 4.I will submit an appropriate acquittal to Council, no more than two months after the end of the project/activity.
- 5.I also confirm that I have read and understood the conditions for funding as outlined in the City of Port Adelaide Enfield's [Creative Industry Grant Information Sheet](#) - I confirm that I accept and agree to abide by the conditions therein.
- 6.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 program.
- 7.I understand that should this application be approved by the City of Port Adelaide Enfield, I might be required to provide an Event Permit (or other relevant permit) two months before conducting the project/activity.
- 8.I also agree to acknowledge Council's funding of the project in any publicity or promotion.
- 9.I further agree that monies received from the City of Port Adelaide Enfield will be expended 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.
- 10.Any changes to the agreed expenditure of Council's grant funds must be negotiated in writing with Council's Grants Team.

I agree to abide by the above Terms and Conditions *

☐ Yes I agree

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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.