**Murra Warra Wind Farm Sustainable Community Grants Fund**

**Application Form**

**SECTION ONE – Applicant Details:**

|  |  |
| --- | --- |
| Group/Organisation Name: |  |
| Applicants Name: |  |
| Role within the Group/Organisation: |  |
| Postal Address: |  |
| Phone: |  |
| Email: |  |

Is your group/organisation registered for GST?

YES 🞏 NO 🞏

If YES, what is your ABN?

Is your group/organisation not-for-profit?

YES 🞏 NO 🞏 (if NO, you do not qualify for grant funding)

Does the group/organisation use a facility controlled by a Committee of Management?

YES 🞏 NO 🞏

Will your project impact the above-mentioned facilities?

YES 🞏 NO 🞏

If YES, please provide written approval for the project from the Committee of Management.

Does the Group/Organisation have Public Liability Insurance?

YES 🞏 NO 🞏

If YES, please provide a copy of Certificate of Currency.

Which of the following municipalities is the Group/Organisation based in?

Hindmarsh 🞏 Horsham 🞏 Yarriambiack 🞏

What is the physical address your project will be based?

Please provide an estimate in kms (as the crow flies) the Group/Organisations and/or the projects proximity to the Murra Warra Wind Farm1 Site (Ailsa Wheat Road, Murra Warra, VIC, 3393):

**SECTION TWO – PROJECT DETAILS:**

Project Name:

Describe the project in 500 words or less (please attach as separate document if more room is required):

Please note the description must address:

* The projects main objectives
* How the project will benefit the local community

What is the expected number of people the project will benefit?

1 – 50 🞏 50 – 100 🞏 100 – 200 🞏

200 – 300 🞏 300 – 500 🞏 500+ 🞏

Please identify the different demographics the project will benefit.

Youth 🞏

Families 🞏

Seniors 🞏

LGBTQI+ Community 🞏

Aboriginal or Torres Strait Islander People 🞏

Migrants/Refugees/CALD Communities 🞏

People with Disabilities 🞏

People from low-socio economic backgrounds 🞏

Other (please identify):

What is the anticipated project start date?

What is the anticipated project end/completion date?

Is the Project one-off or recurring?

One-Off 🞏 Recurring 🞏

If recurring, how many times or how regularly will the project be held?

Will revenue be generated from this project?

YES 🞏 NO 🞏

If YES, what is the anticipated revenue and how will it be utilised?

Who will manage the project?

|  |  |
| --- | --- |
| **Name:** |  |
| **Phone:** |  |

**SECTION THREE – SELECION CRITERIA:**

Identify what project category the project aligns with by describing how it does so (please complete all that apply):

|  |  |  |
| --- | --- | --- |
| Project Categories | How does your project align with project category? | Weighting for assessment |
| Sustainable environmental projects |  | 40% |
| Education and Training |  | 20% |
| Social, Health and wellbeing |  | 20% |
| Sport and Recreational |  | 10% |
| Cultural Diversity and Arts |  | 10% |

# Please attach additional details addressing the selection criteria in a separate document if preferred.

**SECTION FOUR – BUDGET:**

Please identify if you are applying for a SMALL or LARGE Grant:

Small grant up to $5000 🞏 Large grant between $5001 and $20,000 🞏

What is the **TOTAL DOLLAR AMOUNT** you are applying for in this grant application?

The funding request amount must equal what's listed on your budget. Please use exact figures e.g. $1234.56.

|  |
| --- |
| **$** |

Please itemise the budgeted expenditure for your project.

Please attach:

* One quote for goods/services valued in between $1,000 - $2,499
* Two quotes for goods/services valued in excess of $2,500
* Most recent bank statement
* Annual financial statement (large grant applications only)

|  |  |  |
| --- | --- | --- |
| **EXPENDITURE** | **Amount $** | **Confirmed Y/N** |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL** |  |  |

|  |  |  |
| --- | --- | --- |
| **INCOME** | **Amount $** | **Confirmed Y/N** |
| Cash from your organisation |  |  |
| Other Income (please specify) |  |  |
| Requested amount from this grant application |  |  |
| **TOTAL** |  |  |

**For funding requests above $5,000**, it is expected that the applicant will provide **matching funds on a 1:2 ratio** (please refer to Application Guidelines for examples). Matching contributions can be from the community group and/or from another **confirmed** grant or source.

In-kind support, as part of the applicant’s contribution **will not be considered**.

Will this project go ahead without this grant funding?

YES 🞏 NO 🞏

If ‘No’ what is the minimum amount required from this grant application to enable the project to go ahead?

# SECTION 5 - DECLARATION

I declare that the information provided in the funding application, to the best of my knowledge, is true and correct. I understand that this is an application only and may not necessarily result in funding approval.

|  |  |
| --- | --- |
| **FULL NAME:** |  |
| **SIGNATURE:** |  |
| **DATE:** |  |

# SECTION 6 - ATTACHMENTS

Please include the following documents in your application

* Most current Bank Statement
* Annual financial statement (large grants only)
* Quote/s (for items over $1000.00)
* Copy of Public Liability Insurance (if applicable)
* Written approval from Committee of Management (if applicable)
* Letter of support from your Group/Organisation (for large grants only)
* Letter of support from supporting partner/s (large grants only)

**SECTION 7 – CHECK LIST**

Have you completed the form in its entirety? 🞏

Do you have evidence of the required matching funds (large grants only) 🞏

Have you included all attachments as requested above? 🞏

Does the project end/completion date fall within the required timeframe? 🞏

Have you submitted the application before the application close date? 🞏