**Community Funding Application Form**

It is a condition of funding that the applicant contact the Shire of Toodyay at (08) 9574 9300 to discuss their application to ensure it meets the criteria before making their submission.

**Project Summary**

|  |  |
| --- | --- |
| **Organisation Name** |  |
| **Project Title** |  |
| **Project Description & Objectives** |  |
| **Project Start Date** |  |
| **Project End Date** |  |
| **Total Budget** | $ |
| **Requested Funding** | $ |

**Organisation Details**

|  |  |  |
| --- | --- | --- |
| **ABN** |  | |
| Is your organisation registered for GST? | |  |
| Is your organisation incorporated? | |  |
| Do you have Public Liability Insurance? Have you checked with your insurer that it covers your proposed project or activity? | |  |
| **Postal Address** |  | |
| Please give the name, telephone and email contact for the person in your organisation who can provide further information. Under Privacy Act (1988) you must get consent from this person before recording their details below | | |
| **Contact Person** |  | |
| **Phone** |  | |
| **Email** |  | |

**Funding Category**

|  |  |  |
| --- | --- | --- |
|  | **Category** | **Sections to complete** |
|  | **Community funding – Small Grant**  $1,000 - $3,000 | * Strategic alignment |
|  |
|  | **Community Funding – Large Grants**  $3,001 - $10,000 | * Strategic alignment * Community outcomes * Promotional opportunities * Project budget |
|  |
|  | **Events, Tourism & Economic Development Funding**  Maximum $15,000 | * Strategic alignment * Community outcomes * Promotional opportunities * Project budget * Risk Management Plan (to be attached) |
|  |

**Strategic Alignment**

The Shire of Toodyay has a [2023-2033 Council Plan](https://www.toodyay.wa.gov.au/council/shire-projects/plan-for-the-future-2023-2033.aspx) that guides future direction. A copy can be found on the Shire’s website or by emailing [records@toodyay.wa.gov.au](mailto:records@toodyay.wa.gov.au).

Please indicate which objectives your project or event aligns to.

|  |  |  |
| --- | --- | --- |
| **Strategic Aspiration** | **Outcomes** | **How your project will align** |
| *PEOPLE* | 1. A safe and healthy community. 2. An inclusive, connected community. |  |
| Toodyay has a safe, cohesive, and healthy community. |
| *PROSPERITY* | 1. A strong, diverse, and sustainable economy. 2. Toodyay is a popular tourism destination. |  |
| Together, we are building a vibrant, diverse, and sustainable economy. |
| *PLANET* | 1. Our natural assets and ecosystems are being maintained and protected for future generations. 2. Climate resilience. |  |
| Our natural assets and ecosystems are being maintained and protected for the enjoyment of current and future generations. |
| *PLACE* | 1. High quality town planning complements our rural ambience and heritage. 2. Safe, sustainable and affordable transport options. |  |
| Our rural lifestyle is valued and is being enhanced with thoughtful planning and development. |

**Community Outcomes**

How will your project achieve positive community outcomes? Complete all that apply:

|  |  |
| --- | --- |
| **Economic Impact** |  |
| **Social Benefit** |  |
| **Environmental Benefit** |  |
| **Promotional Benefit** |  |

**Promotional Opportunities**

|  |
| --- |
| What media coverage are you expecting for your project? |
|  |
| How will your project acknowledge the Shire of Toodyay? |
|  |

**Project Budget**

Attach a separate page if necessary

|  |  |
| --- | --- |
| **Expenditure** | |
| **Item** (equipment, marketing, hire fees etc.) | **Amount** (GST exclusive) |
|  |  |
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|  |  |
| **Total Expenditure** |  |
|  |  |
| **Income** | |
| **Cash Support** | **Amount** (GST exclusive) |
| Shire of Toodyay Funding |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total Cash Support** |  |
| **In-Kind Support** |  |
|  |  |
|  |  |
|  |  |
|  |  |
| **Total In Kind Support** |  |
| **Total Income** |  |

**Checklist**

Please include the following items with your application (where applicable):

|  |  |
| --- | --- |
|  | Certificate of Incorporation |
|  | Public Liability Insurance |
|  | Current Financial Statement for the previous financial year |
|  | Endorsement by the organisation’s committee (eg. copy of minutes) |
|  | Copies of letters of support from key partners |
|  | Risk Management Plan (for the Events, Tourism and Economic Development category only) |

**Declaration**

I, the undersigned, certify that I have read and understood the Community Funding Guidelines, that I have been authorised to submit this application and that the information contained herein and attached is, to the best of my knowledge, true and correct.

|  |  |
| --- | --- |
| **Name** |  |
| **Position** |  |
| **Signed** |  |
| **Date** |  |

**Office Use Only**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Officer |  | | Date Received | |  | | |
| Record # |  | | Acknowledgement | |  | | |
| Outcome | Successful | Unsuccessful | Record # |  | | Amount |  |
| Acquittal received |  | | Invoice # |  | | Amount |  |
| Paid Date |  | | Work Order | |  | | |