

ACT Heritage Grants Program 2008-2009 Grant Application

Applications close at 5 pm on Friday 09 May 2008

Office Use Only

HG08/ _____
Priority area: _____

PROJECT DETAILS

Project title

.....
.....

Project summary

.....
.....
.....

Total funding sought

\$

ELIGIBILITY CHECK

You MUST tick the box to confirm the following:

Please note: your application will be returned to you if this section has been left blank)

- You do not have an overdue unacquitted grant from the ACT Heritage Grants Program.
- You have either an Australian Business Number (ABN) or have attached a 'Statement by Supplier' form declaring you are not carrying on a business (available from the Australian Taxation Office).
- You are not a current ACT Heritage Unit staff member or a member of the ACT Heritage Council.
- The project is not the responsibility of normal government operations/core business.
- You hold appropriate public liability insurance and have attached your insurance certificate or will obtain appropriate insurance if successful.
- Adequate funding is not available from you/your organisation or a funding source other than the Program.
- Grant funding is not required for the purchase of equipment.
- Grant funding is not required to assist with day-to-day operational expenses that are primarily the responsibility of you/your organisation.
- Grant funding is not for reimbursement for work underway.
- The amount requested does not include GST.
- You can complete all aspects of your project including final reports and acquittal of funding within 12 months from signing the Deed of Grant.



ACT Heritage Unit
Environment Protection and Heritage
Environment and Recreation
www.tams.act.gov.au

APPLICANT DETAILS

Individual Group Organisation Incorporated

Grant applicant (individual/organisation)

ABN:..... (If you do not have an ABN, then you MUST obtain a 'Statement by Supplier' declaration from the Australian Taxation Office (ATO) that you are not carrying on a business and INCLUDE this with your application otherwise the ACT Government is required to withhold tax at the highest marginal rate of 48.5% and remit this to the ATO).

GST Registered: Yes No

Please identify below if you or someone else in your organisation has worked for the ACT Heritage Unit or been a member of the ACT Heritage Council in the past. Please also identify any other potential conflicts of interest: (Please note that if you inform us of these details it will not necessarily be a detriment to your application) ..

.....
.....
.....

Insurance

Yes we have existing public liability insurance which will cover the project for \$

Yes we have existing professional indemnity insurance Coverage: \$

OR

No we will obtain suitable insurance if successful (refer to Grant Pack for details on insurance).

Insurance company:

Type of insurance:

Policy No:

Expiry date:

***Please attach copy of insurance certificate** (The ACT Government requires applicants to hold appropriate Public Liability Insurance to cover the activities undertaken under the grant should they be successful. The Territory may require up to \$20 million dependent on the nature and risks of the proposed project.).

Project contact

Name Position

Postal address

Street address (if different from above)

Business phone After hours phone

Mobile number Fax number

E-mail address Web address

DECLARATION BY CEO OR EQUIVALENT

I, (Name) of (Address)

do hereby apply for financial assistance under the ACT Heritage Grants Program for the purpose(s) described in this application and any attachments to it, in accordance with the criteria and conditions described in the supporting

Information Guide, and certify for and on behalf of (insert name of

Incorporated Organisation if applicable) that all of the information provided in this application and any attachments is

true and correct and that any grant received will be used entirely for the purpose(s) for which it is approved.

..... /

Signature

Position in Organisation

Date

Who will benefit in the ACT Community?

e.g. children, residents of a particular suburb/area

.....
.....
.....

Why do you think there is a need for your project?

.....
.....
.....

Timetable/Staging

Start date (from August of funding year) Completion date:

Provide details of project milestones and timing. If longer than 12 months, please attach justification for this.

Month	Stage/Milestone	Details

OTHER GRANTS / FUNDING

I/we have applied for grant funding for this project from another organisation.

Please provide details on the funding program and amount you have applied for:

.....
.....

Previous ACT Heritage or other grant(s):

If many grants, only provide the most recent or relevant

Year	Project Title	Funding Body	\$ Funded	Acquitted
				Yes / No
				Yes / No
				Yes / No

Potential income earned through grant project:

I/we will not be receiving any revenue from

OR

I/we will be selling the at an estimated cost of \$ each, total revenue \$

Any profits from project will be going to

PROJECT BUDGET

INCOME (non GST)		EXPENDITURE		Grant funding	Other Income	GST
HERITAGE GRANT FUNDING \$ _____		Salaries and wages	_____	\$ _____	\$ _____	
		_____	_____	\$ _____	\$ _____	
OTHER INCOME		Sub-contractor				
Applicant's own		_____	_____	\$ _____	\$ _____	\$ _____
Contribution	\$ _____	_____	_____	\$ _____	\$ _____	\$ _____
Project income		Consultant costs				
Revenue	\$ _____	_____	_____	\$ _____	\$ _____	\$ _____
Donations and/or		_____	_____	\$ _____	\$ _____	\$ _____
Fund raising	\$ _____	_____	_____	\$ _____	\$ _____	\$ _____
Sales	\$ _____					
Other	\$ _____	Sub-total		\$ _____	\$ _____	\$ _____
Sub-total	\$ _____					
Financial support		Administrative Costs				
From		Advertising/promotions		\$ _____	\$ _____	\$ _____
_____	\$ _____	Hire of equipment		\$ _____	\$ _____	\$ _____
_____	\$ _____	Photography/video		\$ _____	\$ _____	\$ _____
_____	\$ _____	Postage/freight		\$ _____	\$ _____	\$ _____
Sub-total	\$ _____	Production costs/printing		\$ _____	\$ _____	\$ _____
		Administrative/stationery		\$ _____	\$ _____	\$ _____
		Photocopying		\$ _____	\$ _____	\$ _____
		Telephone/web access		\$ _____	\$ _____	\$ _____
In kind support		Travel/accommodation		\$ _____	\$ _____	\$ _____
From:		Typing/transcribing		\$ _____	\$ _____	\$ _____
_____	\$ _____	Editing fee		\$ _____	\$ _____	\$ _____
_____	\$ _____	Audit fee		\$ _____	\$ _____	\$ _____
_____	\$ _____	Other		\$ _____	\$ _____	\$ _____
Sub-total	\$ _____	Sub-total		\$ _____	\$ _____	\$ _____
		Column Total:		\$ _____	\$ _____	\$ _____

TOTAL INCOME \$ _____

\$ _____ TOTAL EXPENDITURE (Grant funding + Other Income)

- DOUBLE CHECK:**
- Your budget sheet balances!
 - Total Expenditure above MUST EQUAL the Total Income.
 - GST should be accounted for separately in the GST column.



Quotes must be provided for all major items and letters confirming any other sources of income.

PROJECT STAFFING

Who will undertake this project in your organisation?

If you will be creating a new position for the project, please attach a list of position duties.

Name Skills & qualifications

.....
.....

Sub-contractors and/or consultants

I propose to tender this project out – attach details of your requirements **OR**

I have someone in mind – attach details & references

Note that you may be requested to tender out work.

Volunteers — Provide details of the work to be done by volunteers

.....
.....

The sub-contractors, consultants, volunteers and/or other professional staff employed to work on this project, must hold appropriate insurance.

PROJECT SUPPORT

You must obtain written support and/or permission prior to your project's assessment from relevant individuals, groups, property owners, lessees or government departments. This is essential where you wish to undertake a project on another person's property.

Letter(s) attached from **In kind support** – attach confirmation letters and any further details

Letter(s) attached from

PROMOTION

Promotion

Which of the following do you intend to use to promote your project?

Heritage Festival events

Radio interview/s

Paid advertisement/s

Other public event/s

TV interview/s

Free advertisement/s

Product launch

Media release/s

How else will you promote your grant project to the community?

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.....
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FINAL CHECK AND LODGEMENT DETAILS

Is the form complete and the declaration signed?

Are all attachments, quotes, CVs etc attached?

'Statement of Supplier' form if you don't have an ABN;

insurance certificate(s);

quotes;

letters confirming other financial contributions to the project; and

letters of support.

Do you have a copy of this application for your records?

Thank you for your time!

Enquiries: 13 22 81

Grants Officer: (02) 6207 2160

website: www.tams.act.gov.au