MINOR OR MAJOR GRANTS APPLICATION FORM

ISAAC REGION
HELPING TO ENERGISE THE WORLD
ABN 39 274 142 600

Isaac Regional Council is collecting personal information you supply on this form in accordance with the *Information Privacy Act 2009*. Your personal information will be used by Council officers who have been authorised to do so. The information will not be given to any other person or agency unless required by law or unless your permission is sought. Personal information will be handled in accordance with the *Information Privacy Act 2009*.

INTRODUCTION

Isaac Region's Community Grants Program assists local community groups and organisations undertaking projects or activities which benefit the community. Before completing this application, please read the Community Grants Guidelines to ensure your application meets the criteria. Upon completion of this form please see the Application Checklist to ensure your application is complete: www.isaac.qld.gov.au/community/isaac-community-grants To complete your application online, go to https://speakup.isaac.qld.gov.au/isaac-community-grants

WHICH GRANT ARE YOU APPLYING FOR:

☐ **MINOR GRANT (MAXIMUM $1,000)** *APPLICATION CATEGORY REMAINS OPEN YEAR-ROUND.*	☐ **MAJOR GRANT (MAXIMUM $5,000)** *THIS APPLICATION CATEGORY HAS SET FUNDING ROUNDS THROUGH THE YEAR.*
☐ Community Development ☐ Community Facilities ☐ Community Events ☐ Sport, Recreation and Healthy Living	☐ Community Development ☐ Community Facilities ☐ Community Events ☐ Sport, Recreation and Healthy Living

GROUP/ORGANISATION DETAILS

ORGANISATION NAME	
APPLICANT'S NAME	
POSITION/TITLE	
ADDRESS	
PHONE	
EMAIL	
IS YOUR GROUP/ORGANISATION INCORPORATED?	☐ Yes – Incorporation Number: ☐ No – You will need a sponsoring body that is incorporated to proceed with this application (please complete Section 2) ☐ Exempt from incorporation under legislation (P&C Associations or Registered Charity). Please specify:
DOES YOUR GROUP/ORGANISATION HAVE AN ABN?	☐ Yes – ABN Number: ☐ No

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IS YOUR GROUP/ORGANISATION REGISTERED FOR GST?	☐ Yes ☐ No
WILL YOUR GROUP/ORGANISATION COVER THE PUBLIC LIABILITY FOR THIS PROJECT/ACTIVITY?	☐ Yes – Please provide a copy of the current certificate of currency. ☐ No **NOTE:** Public liability coverage of no less than $20m is required.
CAN YOU PROVIDE YOUR ORGANISATIONS MOST RECENT AUDITED FINANCIAL REPORT?	☐ Yes – Please provide a copy. ☐ No – Please provide an explanation: **NOTE:** Your group/organisations audited financial report will have been adopted at your most recent Annual General Meeting and presented to the Office of Fair Trading as part of your Annual Return (Form 32).
CAN YOU PROVIDE A BUDGET FOR YOUR PROJECT/EVENT (MANDATORY)?	☐ Yes – Please provide a copy, including written quotes for expenses. ☐ No – This application is not eligible. **NOTE:** A budget template can be found on the Council website www.isaac.qld.gov.au/community/isaac-community-grants

AUSPICING GROUP/ORGANISATION DETAILS (IF APPLICABLE)

NOTE: If this application is being auspiced by another group/organisation, please provide their details below.

NAME	
ADDRESS	
PHONE	
EMAIL	
INCORPORATION NUMBER:	
DOES YOUR GROUP/ORGANISATION HAVE AN ABN?	☐ Yes - ABN Number: ☐ No
IS YOUR GROUP/ORGANISATION REGISTERED FOR GST?	☐ Yes ☐ No
WILL YOUR GROUP/ORGANISATION COVER THE PUBLIC LIABILITY FOR THIS PROJECT/ACTIVITY?	☐ Yes – Please provide a copy of the current certificate of currency ☐ No **NOTE:** Public liability coverage of no less than $20m is required.

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PROJECT OR ACTIVITY SNAPSHOT

PROJECT/ACTIVITY NAME	
LOCATION	
DATE	
DESCRIPTION OF YOUR PROPOSAL: (PLEASE INCLUDE A DETAILED DESCRIPTION OF YOUR PROPOSAL INCLUDING THE BENEFITS TO OUR REGION AND WHO WILL BENEFIT FROM THE GRANT FUNDING)	
TARGET AUDIENCE	
REACH (HOW MANY PEOPLE DO YOU EXPECT TO ATTEND)	
FUNDING DETAILS	**NOTE:** Applicants seeking amounts over $5,000 must first contact Council's Engaged Communities team (1300 ISAACS or communitygrants@isaac.qld.gov.au) prior to completing this application. Council cannot be the sole funding source for a project. Depending on the value of the grant request, a co-contribution is required. This can be cash, in-kind, or other grants. $1,001 - $2,500 requires 20%, $2,501 - $5,000 requires 30%, and $5,001+ requires 40% co-funding. Please calculate your contribution using the table below.

BREAKDOWN OF FUNDING INCLUDING CO-FUNDING AMOUNT CONTRIBUTED BY YOUR GROUP OR OTHER FUNDING BODIES. (PLEASE PROVIDE EVIDENCE OF CO-FUNDING CONTRIBUTIONS)	Amount requested from Council:	
	Cash contribution:	
	In-kind: Note: This figure should not include volunteer labour	
	Grants/Sponsorships (other than Council):	

TOTAL COST OF EVENT: (FIGURE MUST MATCH BUDGET)	
WHAT WILL THE REQUESTED FUNDS BE SPECIFICALLY USED FOR?	

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HAVE YOU DISCUSSED YOUR PROPOSAL WITH RELEVANT COMMUNITY STAKEHOLDERS? E.g. relevant community groups or individuals affected by your event/activity	☐ Yes - please indicate who:
	☐ No

PROJECT OR ACTIVITY PERMITS/APPROVALS

WILL YOUR PROJECT OR ACTIVITY INVOLVE THE PREPARATION, SERVING OR SELLING OF FOOD OR REFRESHMENTS?	☐ Yes – Food licence is required. Please provide a copy of your food licence or proof of lodgement (receipt) ☐ No
WILL YOUR PROJECT OR ACTIVITY INVOLVE THE SERVING OR SELLING OF ALCOHOLIC BEVERAGES?	☐ Yes – Liquor licence is required. Please provide a copy of your liquor licence or proof of lodgement (receipt) ☐ No
DOES YOUR PROJECT OR ACTIVITY REQUIRE LOCAL AND STATE PLANNING OR BUILDING APPROVALS?	☐ Yes – please provide a copy or proof of lodgement (receipt) ☐ No
DOES YOUR ACTIVITY HAVE APPROVAL TO OCCUR AT A PLANNED LOCATION?	☐ Yes – We have leasehold or approval of leaseholder OR an approved booking for Council open space/facility OR approval to use privately owned land/facility ☐ No – Approval/permission must be obtained prior to application **NOTE:** if you need to hire a Council facility to hold your event please visit http://www.isaac.qld.gov.au/hiring-council-facilities
DOES YOUR ACTIVITY REQUIRE PLACEMENT OF TEMPORARY SIGNAGE ON COUNCIL PROPERTY OR CLOSURE OF COUNCIL ROADS OR FOOTPATHS?	☐ Yes – please complete an application for Works on Road Corridor/Road Property form. The Traffic Management Company will also need to complete a Non-Engaged Contractors Site Access Occupancy Form. These must be submitted with the appropriate Traffic Management Plan (TMP) and Traffic Guidance Scheme (TGS) at least 4 weeks before the event. (Please note that TMP and TGS can take up to 4 weeks to be completed before you can submit with these applications). These forms can be found at: https://www.isaac.qld.gov.au/homepage/237/roads ☐ No For more information please send enquiries through to records@isaac.qld.gov.au or call 1300 ISAACS.

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ISAAC.QLD.GOV.AU
P 1300 472 227   F 07 4941 8666   A PO Box 97 Moranbah QLD 4744

f isaacregionalcouncil   isaacregionalcouncil   Isaacrcouncil
ISAAC REGIONAL COUNCIL ABN 39 274 142 600

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This Event Plan should accompany any Minor or Major Grant Application under the Community Grants Guideline.

DETAILS OF EVENT

NAME OF EVENT	
DATE OF EVENT	
TIME OF EVENT	
LOCATION OF EVENT	NOTE: if you need to hire a Council facility to hold your event please visit http://www.isaac.qld.gov.au/hiring-council-facilities
CONTACT PERSON/S	
PHONE	
EMAIL	

DESCRIPTION/TIMELINE OF EVENT

PLEASE PROVIDE A DESCRIPTION OF THE EVENT AND DETAIL OR ATTACH AN OFFICIAL PROGRAM IF AVAILABLE	

RISK ASSESSMENT

IDENTIFY POSSIBLE RISKS AND DEVELOP STRATEGIES TO MINIMISE THEM. WHAT IS YOUR BACK UP PLAN IN WET WEATHER?	

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COUNCIL REPRESENTATION AT EVENT

WHAT OPPORTUNITIES ARE THERE FOR COUNCIL REPRESENTATION AT THE EVENT? IS THERE AN OFFICIAL ROLE (e.g. presentation of speech)?	Would you like a representative from Isaac Regional Council to attend? ❑ Yes - please indicate who _____ ❑ No If yes, please provide details below if there will be a requirement for an official role? Task _____ Time Required _____ Contact Person _____ Where to meet _____
IS THIS A SPONSORSHIP REQUEST?	❑ Yes – please indicate level of tier _____ ❑ No
WHAT DOES THE SPONSORSHIP INCLUDE? **IF APPLICABLE, PLEASE COMPLETE THESE DETIALS**	Number of Event Tickets_____ Tables(s) Available for Council representatives_____ Does the event include catering for sponsors? _____ When will tickets be provided _____ Please list contact person and contact details _____ Please add any relevant details of sponsorship package _____ _____ _____ _____

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EVENT PROMOTION

HOW WILL YOU PROMOTE YOUR EVENT AND ITS SPONSORS?	☐ Local media (newspaper, radio)
	☐ TV Advertising
	☐ Flyers/posters/letterbox drop
	☐ Regional media (Daily Mercury, Rockhampton Bulletin, CQ News)
	☐ Council's online Events Calendar – refer to https://www.isaac.qld.gov.au/community/community-events-calendar
	☐ Facebook/Social Media
	☐ An Isaac banner will be displayed at the event
	☐ Isaac Regional Council's vision video will be displayed at the event
	☐ Other (please specify):

Once completed please send form and any attachment to:

records@isaac.qld.gov.au or Isaac Regional Council, PO Box 97, Moranbah QLD 4744
or deliver in person to your local Isaac Regional Council office

DEPARTMENT USE ONLY

| PROCESSED BY | Signature | Date |
| | Print Name | |

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SUPPLIER REQUEST DETAILS (REQUIRED FOR PAYMENT TO GROUP / ORGANISATIONS)

NOTE: Electronic Funds Transfer (EFT) is Isaac Regional Council's preferred method of payment. To ensure that payments are made to the correct bank account, please provide a copy of your Bank Deposit Slip or top portion of the statement of the EFT on business letterhead.

ORGANISATION NAME	
TRADING NAME	
ABN	

PAYMENT ADDRESS DETIALS (FOR ALL REMITTANCE)

Please list the organisation details not personal details.

NAME	
POSITION TITLE	
ADDRESS	
PHONE	
EMAIL	

BANK ACCOUNT DETIALS

ACCOUNT NAME	
BANK	
BSB (6 DIGITS)	
ACCOUNT NUMBER	

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AUTHORISATIONS

IN SUBMITTING THIS APPLICATION, I CONFIRM THAT:	☐ I am an authorised representative of the applying organisation and am acting on their behalf ☐ I have read the Isaac Regional Council Community Grants Guidelines ☐ The statements made in this application are true. ☐ All necessary permits/approvals will be obtained prior to the beginning of the project. ☐ The project will be covered by appropriate insurance. ☐ All relevant health and safety standards will be met. ☐ I acknowledge that Council does not accept any liability or responsibility for the project.
IF MY APPLICATION IS SUCCESSFUL, I WILL:	☐ Ensure acquittal requirements are met within 12 weeks of the project completion or prior to another major grant application. ☐ Accept the terms of the community grant in accordance with Council requirements set out in the Letter of Offer and Funding Agreement. ☐ Provide proof of other successful co-funding (if unconfirmed) within six months of notification. ☐ Complete the project within 12 months of receiving Council funding.
AUTHORISED PERSON	Name Position Title Date

Please check this application against the Application Checklist to ensure it is complete:
www.isaac.qld.gov.au/community/isaac-community-grants

> Once completed please send form and any attachment to:
> records@isaac.qld.gov.au or Isaac Regional Council, PO Box 97, Moranbah QLD 4744
> or deliver in person to your local Isaac Regional Council office.

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