

## 2024/2025 SECTION 356 (ACCESS INCENTIVE) SMALL GRANT APPLICATION

| Date:   |               |            |
|---|---------------|------------|
| PART A – GRANT AMOUNT REQUESTED                                     |               |            |
| Grant funds sought (GST excl): \$ Total Pro                         | ject Cost: \$ | (GST excl) |
| * Maximum grant available is \$2,000 (GST excl)                     |               |            |
| * Applicants are required to contribute a minimum of 25% of total p | project cost) |            |
| PART B – CONTACT/ELIGIBILITY DETAILS                                |               |            |
| Name of Business/Organisation:                                      |               |            |
| Address:  |               |            |
| Postal Address:   |               |            |
| Key Contact Person:   |               |            |
| Position:   |               |            |
| Telephone: Mobile:  |               |            |
| Email:  |               |            |
| Business/Organisation email (if different from key contact email)   |               |            |
| Business/Organisation Facebook Address:                             |               |            |
| ABN # (If applicable):  |               |            |
| Registered for GST?   | ☐ Yes         | □ No       |
| Is the applicant:   |               |            |
| • A Business?   | ☐ Yes         | □No        |
| Non for profit/Registered Charity?                                  | ☐ Yes         | □No        |
| • Incorporated under the Associations Incorporations Act 1984?      | □ Yes         | □No        |
| Physically located in the Gunnedah Shire?.                          | □ Yes         | □No        |



## **PART C- BUSINESS/ORGANISATION DETAILS**

| Provide a brief over-<br>community)          | view of your      | business/organisat       | ion: (retail, | manufacti     | uring, | hospitality, | produce |
|--|-------------------|--------------------------|---------------|---------------|--------|--------------|---------|
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
| Mhan did yaur businass                       | /organisation     | aammanaa trading/a       | unorating?    |               |        |              |         |
| When did your business  Do you employ staff? | ☐ Yes             | □ No                     | peraungr      | •••••         |        |              | ••••••  |
|  |                   |                          | How many o    | casual staff? | )      |              |         |
| Do you have volunteers                       |                   |                          | If yes, how m |               |        |              |         |
|  |                   |                          | ,,            | . , .         |        |              |         |
| PART D – PROJECT DE                          | TAILS             |                          |               |               |        |              |         |
| Provide a brief descripti                    | on of your pro    | ject. I.e., What will tl | ne funding be | e used for?   | (No mo | re than 200  | words)  |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
|  |                   |                          |               |               |        |              |         |
| Are you requesting fund                      | ds for: (Tick all | that apply)              |               |               |        |              |         |
| Equipment?                                   |                   |                          |               | l Yes         |        | □ No         |         |
| Marketing/promotional material?              |                   |                          |               | l Yes         |        | □ No         |         |
| Website redesi                               | gn?               |                          |               | l Yes         |        | □ No         |         |
| Structural mod                               | ifications to yo  | our business/shop/of     | fice?         | l Yes         |        | □ No         |         |
| Signage?                                     |                   |                          |               | l Yes         |        | □ No         |         |
| Other? (If so w                              | /hat?)            |                          |               |               |        |              |         |
| Does the project require                     | e a developme     | nt application?          |               | l Yes         | □ No   | □ Not        | t sure  |



| How will the project enhance accessibil                                       | ity for your custon | ners/clients?             |                        |
|---|---------------------|---------------------------|------------------------|
|   |                     |                           |                        |
|   |                     |                           |                        |
|   |                     |                           |                        |
|   |                     |                           |                        |
|   |                     |                           |                        |
|   |                     |                           |                        |
| Have you commoned the project?  | □ Yes               | □No                       |                        |
| Have you commenced the project?<br>(* Funding is not retrospective and will I |                     |                           | or nurchased prior the |
| grant being awarded)  | Tot be granted for  | works arready commenced t | or parenasea prior the |

## **PART E – PROJECT BUDGET**

(Please outline in the table below the total project cost, and income, including how you propose to spend the grant funds requested from Council)

| Expenditure   |                   |
|---|-------------------|
| Item (Please list each individual item, if applicable) — If Council is unable to fund the entire amount sought, an itemised list may assist with partial funding decisions. | Amount (GST Excl) |
|   | \$                |
|   | \$                |
|   | \$                |
|   | \$                |
|   | \$                |
|   | \$                |
|   | \$                |
| Sub Total   | \$                |
| GST Amount  | \$                |
| TOTAL EXPENDITURE   | \$                |



| Income  |                   |
|---|-------------------|
| Source  | Amount (GST Excl) |
| Section 356 Grant funds requested from Council: | \$                |
| Applicants' co-contribution:                    | \$                |
| Other Funding Sources (please list):            | \$                |
|   | \$                |
| Sub Total                                       | \$                |
| GST Amount                                      | \$                |
| TOTAL INCOME                                    | \$                |

Please note: Income and Expenditure tables should balance (be equal)

If successful it is expected that Council's contribution is acknowledged in your annual financial statement and publicity material

| Given the round is highly competitive, funding for entire projects may not always be possible. If you application is successful, but only certain items are approved under the Grant, will your business/organisation still go ahead with the project? $\square$ Yes $\square$ No |   |  |  |  |
|---|---|--|--|--|
| If <b>No</b> , w  | vhy not?  |  |  |  |
|   |   |  |  |  |
| Please  | Attach:   |  |  |  |
| 1.<br>2.<br>3.  | Quotes or pricing estimates to validate project costs (Online Quotes are acceptable).  Design, drawings, or pictures to support your application (If applicable).  Any relevant approvals to support or enhance your application. |  |  |  |
|   | e note at <u>least one quote is required for all applications</u> )   |  |  |  |
| Name:   |   |  |  |  |
| Position  | n:  |  |  |  |
| Signatu   | re: Date:   |  |  |  |
| Please i  | return the completed form to: -   |  |  |  |
| Post:<br>Email:   | Gunnedah Shire Council, PO Box 63, Gunnedah NSW 2380 council@gunnedah.nsw.gov.au  |  |  |  |

Updated April 2024

Phone:

02 6740 2100