|  |  |  |
| --- | --- | --- |
|  |  | Office Use Only  TRIM: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Grant No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Project Coordinator.\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**CSRFF Small Grants Application Form**

**For projects up to $200,000 to be acquitted by 15 June 2020**

|  |  |  |
| --- | --- | --- |
| **You MUST discuss your project with an officer from your nearest Department of Local Government, Sport and Cultural Industries office before completing and submitting your application. Failure to do so will render your project ineligible.** | | |
| **All applications MUST be submitted to your local government. Contact your local government to determine the cut-off date for the submission of applications.** | | |
| DLGSC Contact: | Date: | Office: |

**Applicant’s Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Organisation Name: |  | | | | |
| Postal Address: |  | | | | |
| Suburb: |  | State: |  | Postcode: |  |
| Street Address: |  | | | | |
| Suburb: |  | State: |  | Postcode: |  |

**Preferred Contact Person:**

*All application correspondence will be directed to this person*

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name: |  | | Title: | | Dr Mr Mrs Ms |
| Position Held: |  | | | | |
| Business Phone: |  | Facsimile: | |  | |
| Mobile Phone: |  | Email: | |  | |

**Organisation Business Details:**

|  |  |  |  |
| --- | --- | --- | --- |
| Does your organisation have an ABN? | Yes  No | ABN: | |
| Is your organisation registered for GST? | Yes  No | \* Note, in order to be eligible for funding you must attach a copy of the Incorporation Certificate. LGA’s exempt | |
| Is your organisation not-for-profit? | Yes  No |
| Is your organisation incorporated? | Yes  No | Incorporation #:       \* | |
| Bank details: | Bank: | BSB: | A/c: |

**Local Government Authority Details:**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| LGA: |  | | | | |
| Contact: |  | | | Title: | Dr Mr Mrs Ms |
| Position Held: |  | | | | |
| Business Phone: |  | Facsimile: |  | | |
| Mobile Phone: |  | Email: |  | | |

**PROJECT DETAILS**

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Title (brief and specific):** | | | |
| **Project Description:** | | | |
| **How did you establish a need for your project?** | | | |
| **What alternatives were considered and why were they rejected (e.g cost, suitability, feasibility)?** | | | |
| **Have the full lifecycle costs of the project been considered and can you afford the ongoing costs of managing, maintaining and replacing the facility? Will a specific asset replacement fund be created?** | | | |
| **Project location:** |  | | |
| **Land ownership:** | Who owns the land on which your facility will be located?  Lease Expiry (if applicable): | | |
| **Planning approvals** |  | If no, provide the date it will be applied for: | |
| **Where applicable, has planning permission been granted?** (LGA) | | Yes  No | \_\_\_/\_\_\_/\_\_\_ |
| **Aboriginal Heritage Act?** | | Yes  No | \_\_\_/\_\_\_/\_\_\_ |
| **Department of Biodiversity, Conservation and Attractions?** (Environmental, Swan River) | | Yes  No | \_\_\_/\_\_\_/\_\_\_ |
| **Native Vegetation Clearing Permit?** | | Yes  No | \_\_\_/\_\_\_/\_\_\_ |
| **Please list any other approvals that are required?** | | Yes  No | \_\_\_/\_\_\_/\_\_\_ |
| **How will your project increase physical activity?** | | | |
| **Do you share your facility with other groups?** Yes  No  If so, who: | | | |

List the main sport and recreation activities (maximum of 3) which will benefit from your proposal. Please indicate the approximate % usage of the facility (or part of the facility relating to this proposal).

|  |  |  |
| --- | --- | --- |
| **Sport/community organisation** | **% use of the facility** | **Hours per week** |
|  |  |  |
|  |  |  |
|  |  |  |

Activity/sport membership numbers over the past three years relevant to your project. For example, if a bowls project, golf members not relevant; social membership numbers not applicable.

Note: if membership is not applicable, ie recreation facility or aquatic centre, enter the number of users of the facility.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **2016/17** |  | **2017/18** |  | **2018/19** |  |

State Sporting Associations are involved in the assessment of applications and may be able to provide valuable information when planning you project, particularly in relation to technical design issues. They should be consulted as part of the application process. A complete list of State Sporting Associations and their contact details are is available on the department’s website: <http://www.dsr.wa.gov.au/contact-us/find-a-sport-or-recreation-association>

|  |  |
| --- | --- |
| **What is the name of the State Sporting Association for your activity/sport?** | |
|  | |
| **Have you discussed your project with your State Sporting Association?** Yes  No | |
| Contact Name: | Date of contact: |

**PROJECT DELIVERY**

|  |  |  |
| --- | --- | --- |
| **Please indicate key milestones of your project. The key milestones need to be realistic and demonstrate that the project can be delivered in the timeframe.** | | |
| **Task** | **Date** |
| Attainment of Council approvals |  |
| Preparation of tender/quotes for the major works contract |  |
| Issuing of tender for major works |  |
| Signing of major works contract |  |
| Site works commence |  |
| Construction of project starts |  |
| Project 50% complete |  |
| Project Completed |  |
| Project hand over and acquittal |  |

|  |
| --- |
| **Are there any operational constraints that would impact on the construction phase of your project?** (such as your sporting season, major annual event or inclement weather) – provide details. Projects that are delayed due to undeclared known constraints are not eligible for a deferral. |

**GST**

Grant payments are payable to the applicant/grantee only. This may have taxation implications for grantees. If grantees wish specific advice relating to their grant, this can be obtained from the Australian Taxation Office (ATO). Please note depending upon the value of the project and/or grant, the ATO may require an organisation be registered for GST. If the applicant is registered for GST, the grant is grossed up with the GST amount.

**PRIVACY STATEMENT AND STATEMENT OF DISCLOSURE**

The Organisation acknowledges and agrees that this Application and information regarding it is subject to the *Freedom of Information Act 1992* and that the Grantor may publicly disclose information in relation to this Application, including its terms and the details of the Organisation.

Any information provided by you to DLGSC can be accessed by you during standard office hours and updated by writing to DLGSC or calling (08) 9492 9700. All information provided on this form and gathered throughout the assessment process will be stored on a database that will only be accessed by authorised departmental personnel and is subject to privacy restrictions.

DLGSC may wish to provide certain information to the media for promotional purposes. The information will only include the applicant’s club name, sport, location, grant purpose and grant amount.

**APPLICANT’S CERTIFICATION**

I certify that the information supplied is to the best of my knowledge, true and correct.

|  |  |
| --- | --- |
| Name: |  |
| **Position Held:** |  |
| **Signature:** |  |
| **Date:** |  |

**LODGEMENT OF YOUR APPLICATION**

* Applications including all attachments are to be received electronically and officially submitted to [csrff@dlgsc.wa.gov.au](mailto:csrff@dlgsc.wa.gov.au) by the cut off date. A hard copy can also be provided and should be clipped at the top left-hand corner, please do not bind.
* It is recommended that you **retain your completed application form**, including attachments for your own records and future audit purposes.
* All **attachments** and supporting documentation (see next section) should be **clearly named and identified** and submitted with the application form.
* **Applications must be submitted to your Local Government Authority** by the Local Government’s advertised cut-off date to ensure inclusion at the relevant Council Meeting.

The following documentation must be included with your application. Applicants may wish to supply additional RELEVANT information.

**Grants up to $66,666:**

|  |  |
| --- | --- |
|  | **Application form.** |
|  | **Incorporation Certificate.** |
|  | **Two written quotes.** |
|  | If your project involves the upgrade of an existing facility, include **photograph/s** of this facility. |
|  | **Locality map, site map and building plans** (in relevant constructions projects), including where the proposed facility is located in relation to other sport and recreation infrastructure. |
|  | **Income and expenditure statements** for the current and next financial years. (LGAs exempted). |
|  | **Written confirmation of financial commitments** from other sources including copies of **council minutes**. (If a club is contributing financially then evidence of their cash at hand must be provided). |
|  | For resurfacing projects, a written guarantee from the supplier of the product that clearly identifies the product’s life expectancy. |
|  | **Itemised project cost for components** and identified on the relevant quote for each (including cost escalation). |
|  | For floodlighting projects, a **lighting plan** must be supplied showing lux, configuration and sufficient power supply |

**Your application will be considered not eligible if:**

* You have not discussed your project with the Department of Local Government, Sport and Cultural Industries and your State Sporting Association.
* You do not meet the eligibility criteria for the grant category to which you are applying.
* You have not included with your application all the relevant required supporting documentation. **There is no onus on Department staff to pursue missing documentation.**
* Applicants/projects that have received a CSRFF grant in the past and have not satisfactorily acquitted that grant. In some cases this may apply to localities where other significant projects have not been progressed or have not completed a previous project in accordance with the conditions of the grant provided. An assessment will be made in November and if no physical progress has occurred, new applications may not be recommended.
* It is not on the correct application form.
* The project for which application is made is specifically excluded from receiving CSRFF support.

**DEVELOPMENT BONUS APPLICANTS ONLY**

If you applied for a CSRFF grant for more than one third of the cost of the project, please provide evidence of meeting at least one of the following criteria**.**

**You MUST contact your local DLGSC office to determine eligibility before applying.**

|  |  |  |
| --- | --- | --- |
| **Category** | | **Details** |
| Geographical location | Regional/remote location Growth local government |  |
| Co-location | New  Existing |  |
| Sustainability initiative | Water saving  Energy reduction  Other |  |
| Increased participation | New participants  Existing participants –   higher level  Special interest  Other |  |

**PROJECT BUDGET**

**ESTIMATED EXPENDITURE**

Please itemise the components of your project in the table below, indicating their cost and which quote or part of quote was used to estimate this. Quantity Surveyor costs will be accepted however the responsibility lies with the applicant to ensure the validity of the information. A contingency allowance is considered an acceptable component. *PLEASE ITEMISE BY COMPONENT (e.g changerooms, storage, kitchen) rather than materials (electrician, plumber, finishings).*

|  |  |  |  |
| --- | --- | --- | --- |
| **Project Description**  **(detailed breakdown of project to be supplied** | **$ Cost ex GST** | **$ Cost inc GST** | **Quote Used**  **(list company name and quote no)** |
| *ie Electrical Works* | *25,000* | *27,500* | *B & S Electrical* |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
| **Donated materials (Please provide cost breakdown)** |  |  |  |
| **Volunteer labour (Please provide cost breakdown)** |  |  |  |
| **Sub Total** |  |  |  |
| **Cost escalation** |  |  | ***Please explain amount used*** |
| **a) Total project expenditure** |  |  |  |

* At least **two written quotes** are required for each component.
* If your project is a floodlighting installation or upgrades, please ensure that the power supply is sufficient and no upgrade will be required. If upgrade is required and not budgeted for, the grant will immediately be withdrawn. A **lighting plan** must be supplied showing lux and configuration.
* Projects that do not meet **Australian Standards** are ineligible for funding.

**PROJECT FUNDING**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Source of funding** | **$Amount ex GST** | **$ Amount inc GST** |  | **Funding confirmed Y / N** | **Comments to support claim**  **(please attach relevant support)** |
| **Local government** |  |  | **LGA cash and in-kind** |  |  |
| **Applicant cash** |  |  | **Organisation’s cash** |  |  |
| **Volunteer labour** |  |  | **Cannot exceed applicant cash and LGA contribution – max $50,000** |  |  |
| **Donated materials** |  |  | **Cannot exceed applicant cash and LGA contribution** |  |  |
| **Other State Government funding** |  |  |  |  |  |
| **Federal Government funding** |  |  |  |  |  |
| **Other funding – to be listed** |  |  | **Loans, sponsorship etc** |  |  |
| **CSRFF request (No Development Bonus)** |  |  | **up to 1/3 project cost** | N |  |
| ***or* CSRFF request (Development Bonus)** |  |  | **Up to ½ project cost** | N |  |
| **b) Total project funding** |  |  | ***This should equal project expenditure as listed on the previous page*** | | |
| **REQUIRED: If the funding approved is less than funding requested for this project, or the project is more expensive than indicated, where would the extra funds be sourced from? Is this funding confirmed? If the project scope would be reduced, which components would be revisited?** | | | | | |
|  | | | | | |

**GST**

Grant payments are payable to the applicant/grantee only. This may have taxation implications for grantees. If grantees wish specific advice relating to their grant, this can be obtained from the Australian Taxation Office (ATO). Please note depending upon the value of the project and/or grant, the ATO may require an organisation be registered for GST. If the applicant is registered for GST, the grant is grossed up with the GST amount.

### PROJECT ASSESSMENT SHEET

This page is for the use of the relevant Local Government Authority to be used for both community and LGA projects. Please **attach copies of council minutes** relevant to the project approval.

|  |
| --- |
| **Name of Local Government Authority**: |
| **Name of Applicant:** |

Note: The applicant’s name cannot be changed once the application is lodged at DLGSC.

**Section A**

The CSRFF principles have been considered and the following assessment is provided:

(Please include below your assessment of how the applicant has addressed the following criteria)

**All applications**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Satisfactory** | **Unsatisfactory** | **Not relevant** |
| Project justification |  |  |  |
| Planned approach |  |  |  |
| Community input |  |  |  |
| Management planning |  |  |  |
| Access and opportunity |  |  |  |
| Design |  |  |  |
| Financial viability |  |  |  |
| Co-ordination |  |  |  |
| Potential to increase Physical activity |  |  |  |
| Sustainability |  |  |  |

**Section B**

|  |  |
| --- | --- |
| Priority ranking of no of applications received | of       applications received |
| Is this project consistent with the | Local Plan  Regional Plan |
| Have all planning and building approvals been given for this project? | Yes  No |
| If no, what approvals are still outstanding? |  |

#### Project Rating (Please tick the most appropriate box to describe the project)

|  |  |  |
| --- | --- | --- |
| A | Well planned and needed by municipality |  |
| B | Well planned and needed by applicant |  |
| C | Needed by municipality, more planning required |  |
| D | Needed by applicant, more planning required |  |
| E | Idea has merit, more planning work needed |  |
| F | Not recommended |  |

|  |
| --- |
| Please complete the questions attached. This assessment is an important part of the CSRFF process and your answers to these questions assist the committee make their recommendations, even if you are the applicant. Please provide a summary of any attachments in your assessment, rather than referring to attachments or external documents such as Council Minutes. |

|  |
| --- |
| Please confirm your contribution to the project, whether it has been formally approved (including financial year for which it is approved) and any conditions on the funding. If no funding has been provided, why not? |
| A) If a community group application: Do you believe the project is financially viable, including the applicant’s ability to provide upfront contributions, ongoing payments and contributions to an asset replacement fund. Does council commit to underwriting any shortfalls as the ultimate asset owner?B) If a council application: Is Council fully aware of the ongoing cost of operating and maintaining this facility and does your organisation have the capacity to service it into the future? How are the user groups contributing to the ongoing cost of operating the facility? |
| Please provide any additional comments regarding this applications merit against the assessment criteria to support your project rating and ranking. |

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

Applications for CSRFF funding must be submitted to your Department of Local Government, Sport and Cultural Industries office by **4pm on 29 March 2019.** Late applications cannot be accepted in any circumstances.

**DLGSC OFFICES**

|  |  |  |
| --- | --- | --- |
| **PERTH OFFICE**  246 Vincent Street  Leederville WA 6007  GPO Box R1250  Perth WA 6844  Tel: (08) 9492 9700  **PEEL**  Suite 94  16 Dolphin Drive  PO Box 1445  Mandurah WA 6210  Tel: (08) 9550 3100  **PILBARA**  Karratha Leisureplex  Dampier Hwy, Karratha  PO Box 941  Karratha WA 6714  Tel: (08) 9182 2100  **SOUTH WEST**  80A Blair Street  PO Box 2662  Bunbury WA 6230  Tel: (08) 9792 6900 | **GREAT SOUTHERN**  22 Collie Street  Albany WA 6330  Tel: (08) 9892 0100  **GASCOYNE**  15 Stuart Street  PO Box 140  Carnarvon WA 6701  Tel: (08) 9941 0900  **GOLDFIELDS**  Suite 1, 349-353 Hannan Street  PO Box 1036  Kalgoorlie WA 6430  Tel: (08) 9022 5800  **KIMBERLEY – Broome**  Unit 2, 23 Coghlan Street  PO Box 1476 Broome WA 6725 Telephone (08) 9195 5750 | **WHEATBELT - NORTHAM**  298 Fitzgerald Street  PO Box 55  Northam WA 6401  Tel: (08) 9690 2400  **WHEATBELT – NARROGIN**  Narrogin Leisure Centre  50 Clayton Rd  Narrogin WA 6312 Telephone 0429 881 369  **MID-WEST**  Level 1, 268-270  Foreshore Drive  PO Box 135  Geraldton WA 6531  Tel: (08) 9956 2100 |