Economic Development and Marketing Grants Application Form

Economic Development and Marketing Grant

Economic Development and Marketing Grants support and facilitate programs, services and projects that contribute to the City of Busselton's economic, social, environmental and cultural development. The program includes grant funding supporting economic development and marketing initiatives delivered by stakeholder groups.

Please note, applications will be assessed at two 'cut off' dates, where the latest submission will be assessed on the following dates:

- 30 October 2024
- 17 March 2025

Available Grant Funding

Grants from \$1,000 up to \$30,000 are available. Funding requests of \$10,000 and above require confirmed 50% matched funding - this can be made up of cash and qualified in-kind contributions.

All applications must demonstrate alignment with identified City of Busselton <u>Economic</u> <u>Development Strategy 2022-27</u> as outlined in the program guidelines.

Helpful Hints

Data and Statistics

The City of Busselton engages REMPLAN for up-to-date economic and demographic data and statistics. This information can be helpful when developing your business case, funding proposals and grant applications.

City of Busselton Economic Report 2021

City of Busselton live REMPLAN DATA

In-kind Contributions

An in-kind contribution is a contribution of a good or a service other than money. You do not need to submit written records of in-kind contributions received for your activity. However, it is your organisation's responsibility to keep written records (e.g. letter of donations or receipts) of the in-kind support committed or received.

How do you calculate your in-kind contribution?

The calculation of your in-kind contribution is based on your best estimates.

- calculate volunteer general labour at \$20 per hour
- calculate volunteer specialist labour (for example, engineer or architect) at \$45 per hour
- calculate donated goods at the price you would pay for them if they were not donated

Applicant Details

* indicates a required field

Organisation Details

| Organisation Name * | | | |
|--|---|------------------|--|
| Type of Organisation e.g. Sole Trader, Company | | | |
| Initiative/Project Title * | | | |
| Organisation's ABN or ARBN | The ABN provided will be use information. Click Lookup about entered the ABN correctly. | | |
| | Information from the Australian Business Register | | |
| | ABN | | |
| | Entity name | | |
| | ABN status | | |
| | Entity type | | |
| | Goods & Services Tax (GST) | | |
| | DGR Endorsed | | |
| | ATO Charity Type | More information | |
| | ACNC Registration | | |
| | Tax Concessions | | |
| | Main business location | | |
| | Must be an ABN | | |
| Registered for GST * | YesNo | | |
| Organisation Postal | Address | | |
| Address * | 1. | | |
| | | | |
| | Address Line 1, Suburb/Town, State/Province, and Postcode are required. | | |
| Primary Website | | | |
| Head of Organisation * | First Name | Last Name | |
| - | | | |
| | | | |
| Position Held | | | |

| Organisation office hours telephone * | | | | |
|---|----------------------------|---------------------------|--|--|
| Head of Organisation email address: * | | | | |
| Project Applicant Contact | Details | | | |
| Contact Name * | First Name | Last Name | | |
| Position held * | | | | |
| Project Contact number (business hours): * | | | | |
| Project Contact Other Phone Number * | | | | |
| Project Contact Primary Email * | | | | |
| About Your Organisation * indicates a required field | | | | |
| How did you hear about this funding round? * City of Busselton website Facebook, LinkedIn or Instagram Business in the Bay eNews Bay to Bay eNews Newspaper Advertising Email Other | | | | |
| What does your organisation do? * | | | | |
| Please describe your organisation structure and primary business objectives. Include any important information to build the picture for the assessment panel. How long has your organisation existed? What is the history and current membership? | | | | |
| Do you have Public Liability In ○ Yes ○ No | nsurance? * | | | |
| Please attach a copy (must be initiative) | e current and provide cove | er for proposed project / | | |

| Attach a file: |
|--|
| |
| Will you be applying for this grant through an auspicing body? ○ Yes ○ No |
| If yes, please provide a copy of the written agreement between the applicant and auspicing body. Attach a file: |
| |
| An Auspice Organisation ensures: |
| the program/event for which the funding is sought, furthers the mission/objectives of their organisation in some way checks the constituent documents (constitution, rules, by laws) that entering into the auspicing agreement is consistent with the objectives and powers of their organisation. |
| In the context of grant applications, an auspice organisation is legally and financially responsible to receive the approved grant money, ensure program/event is completed on time, submits acquittal and evaluation report. |
| Has your organisation previously received funding from the City of Busselton? * ○ Yes |
| O No |
| No If yes, what was the name of the project / initiative? |
| |
| |
| If yes, what was the name of the project / initiative? If yes, what was the total amount funded? |
| If yes, what was the name of the project / initiative? If yes, what was the total amount funded? \$ Must be a dollar amount. If yes, has the funding been acquitted? Yes |
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The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register

| Entity name ABN status Entity type Goods & Services Tax (GST) DGR Endorsed ATO Charity Type ACNC Registration Tax Concessions Main business location Must be an ABN. Auspice Primary Address Address Auspice Primary Phone Number Must be an Australian phone number. Auspice Primary Email Must be an email address. Auspice Primary Website Must be a URL. Project / Initiative Details * indicates a required field | ABN | |
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| Project / Initiative Details * indicates a required field | | |
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| * indicates a required field | | |
| * indicates a required field | Drainet / Initiative Dat | a ila |
| | Project / initiative Det | alis |
| Project / initiative title * | * indicates a required field | |
| Project / initiative title * | | |
| | Project / initiative title * | |
| | | |

| Which of the following initiatives does the project / initiative primarily support? * □ Economic Development Initiative □ Marketing Initiative |
|--|
| Have you spoken to a City of Busselton Officer about the project / initiative? * ☐ Yes ☐ No ☐ It is recommended to have a discussion with the Economic Development Team prior to submission |
| It is recommended to have a discussion with the Economic Development Team prior to submission. Project start date * |
| Must be a date |
| Project end date * |
| Must be a date |
| Amount requested * \$ Up to 50% of total project budget if request is over \$10,000. |
| Total project cost * |
| \$ |
| Provide a brief description of the project / initiative. |
| |
| Word count: Must be no more than 200 words. |
| Outline your project / initiative objectives. |
| |
| Word count: Must be no more than 200 words. |
| Provide a clear plan for delivery of the project / initiative including key dates and timelines. |
| |
| |

Alternatively, upload a project / initiative timeline, calendar, or GANTT Chart.

| Attach a file: | | | | |
|---|-----------------------|--|--|--|
| | | | | |
| Identify and explain the de initiative within the City of | | ed and demand for the project / | | |
| | | | | |
| Provide details of any partnerships that have been explored or secured for the project / initiative. Explain their role in the lead up to, or on the day of the project / initiative. | | | | |
| | | | | |
| E.g. local businesses, service org | anisations, local not | t-for-profits. | | |
| List any attempts to se from other sources. | cure funding | specific to this project / initiatives | | |
| Funding Agency | \$ Amount | Approved / Pending | | |
| | \$ | | | |
| | \$ | | | |
| | \$ \$ | | | |
| | \$ | | | |
| | \$ | | | |
| | \$ | | | |
| | \$ | | | |
| | | | | |
| | | | | |
| Project Description | | | | |
| Project Description * indicates a required field | | | | |

City of Busselton Economic Development Strategy and Program Guidelines can be found at www.busselton.wa.gov.au/business/business-hub/economic-development.aspx:

Outline the proposed economic impact and benefits the project / initiative will bring to the City of Busselton. *

| How will the project / initiative results be measured and reported on as per the acquittal process? | | | | |
|---|----------------------------|-------------------------|----------------------|--|
| | | | | |
| E.g. increased visitors/ dig | gital engagement/ jobs/ po | opulation/ investment) | | |
| Demonstrate how the City of Busselton. * | e project / initiative | represents good valu | ue for money for the | |
| | | | | |
| | | | | |
| Demonstrate how the project / initiative or its outcomes will be sustained after City of Busselton funding ceases. * | | | | |
| | | | | |
| | | | | |
| | | | | |
| Project Budget | | | | |
| Budget: | | | | |
| List all expenditure and income details relating specifically to the project / initiative. Please attach supporting quotes. | | | | |
| If this information exists in another format, please attach a comprehensive budget document below. | | | | |
| Please note: The City of Busselton does not provide grant funding for business operating costs (e.g. staff wages, rent, utilities and consumables) | | | | |
| Budget (all figures are GST exclusive):* | | | | |
| Please don't add commas to figures, eg. write \$1000 not as \$1,000 | | | | |
| Income Description | \$ | Expenditure Description | \$ | |
| | | | | |

| | Must be a dollar amou | nt. | |
|--------------------------------------|------------------------|----------------------|-----------------------|
| | | | |
| | | | |
| Attach budget and | d funding documents | if required | |
| Attach a file: | | | |
| | | | |
| | | | |
| | | | |
| Acknowledgem | nent of Funding | | |
| | | | |
| If vour application | is successful, outlin | e how vou plan to | acknowledge the C |
| Busselton for the s | support provided. Oเ | tline ways you pla | |
| City for joint prom | notion and marketing | material. | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| Other Informat | ion | | |
| | | | |
| We welcome further | information or attachm | ents that may assist | us in processing of y |
| application. | | · | , , , |
| Additional Informa | - ! | | |
| Additional informa Attach a file: | ation | | |
| | | | |
| | | | |
| Conflict of Intere | est | | |
| | | | |
| | your committee emp | | isation that may be |
| financially from th ○ Yes | is grant if successful | ? | |
| O No | | | |
| - | | | |
| If yes, please state | e the nature of this i | nterest below | |
| | | | |
| | | | |
| | | | |

* indicates a required field

Declaration and Privacy Statement

Economic Development and Marketing Grants Application Form

Declaration and Privacy statement

I certify that all details supplied in this application and in any attached documents are true and correct to the best of my knowledge, and that the application has been submitted with the full knowledge and agreement of the management of my organisation/group.

I have read the accompanying guidelines for applicants provided with this application form.

I agree that I will contact the City of Busselton immediately if any information provided in this application changes or is incorrect.

The City of Busselton respects all personal and confidential information received and will do everything possible to protect information from unauthorised access, loss or misuse. Information collected from you is required for the delivery of the services in accordance with the Trustees'/Directors' powers, functions and purposes. It may also be used by the Trustees/Directors and their representatives to conduct research and customer satisfaction surveys so that we may better understand community needs and can improve service delivery. Should you need to change or access your personal details, please contact <contact details>.

I understand that the information above will be used in accordance with relevant legislation and declare that this information is correct to the best of my knowledge.

| I have re O Yes | ad and understo | od the declaration and p | rivacy statement |
|--------------------------|-------------------------------|--------------------------|---------------------------------|
| The Orga * O Yes | anisation has all t | the required insurances, | permits and licenses to operate |
| l have re ○ Yes | ead and understo | ood the guidelines | |
| Authoris Title | ed Person's Nam First Name | Last Name | |
| Position | held * | | |
| Date of o | declaration * | | |