Rates & Charges Donation Application Form

Form Preview

Not-For-Profit Rates & Charges Donation Program

* indicates a required field

Council may grant a donation, in the form of a rebate, of a percentage of certain Council rates and charges, for particular categories of not-for-profit organisations. The purpose of this donation is to assist not-for-profit organisations, who offer a benefit to the residents of the Council area, by alleviating the cost of the annual rates and charges.

No assistance will be offered retrospectively.

The Not-For-Profit Rates & Charges Donations Program is delivered in accordance with Council's Community Support Policy.

Important Information

Before completing this application form, you should have read the program guidelines.

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant.

If you have any questions regarding the eligibility criteria or application process, please contact the Sport, Recreation & Community Development team on 1300 972 753.

Please have your application number on hand when contacting Council regarding your grant application.

Application Number

This field is read only.

Confirmation of Eligibility

Before proceeding, please confirm the following:

- you have read and understood the program guidelines
- you are able to demonstrate alignment between your project and the aims of this program
- your organisation is a not-for-profit organisation
- your organisation is a community club or volunteer group
- your organisation is a school or learning institution (for activities that are not curriculum based and the benefit is for the wider community)
- your organisation is incorporated, or is auspiced by an incorporated organisation for the purposes of this application
- your organisation is located in (and/or supplies services to) the Whitsunday Regional Council area
- your organisation does not owe any reports or money to Whitsunday Regional Council

- your organisation has the appropriate type and level of insurance for the activities that are the subject of this grant
- you are not an individual

You must confirm that all statements above are true and correct. *
☐ Yes

Contact Details

* indicates a required field

Privacy Notice

Queensland has privacy legislation that applies to the Queensland public sector - the Information Privacy Act 2009. The Act contains privacy principles that set out how agencies may and must handle personal information. Personal information means any information about an identifiable person. Our Privacy Notice refers to details of the types of personal information that we hold and how we handle this information.

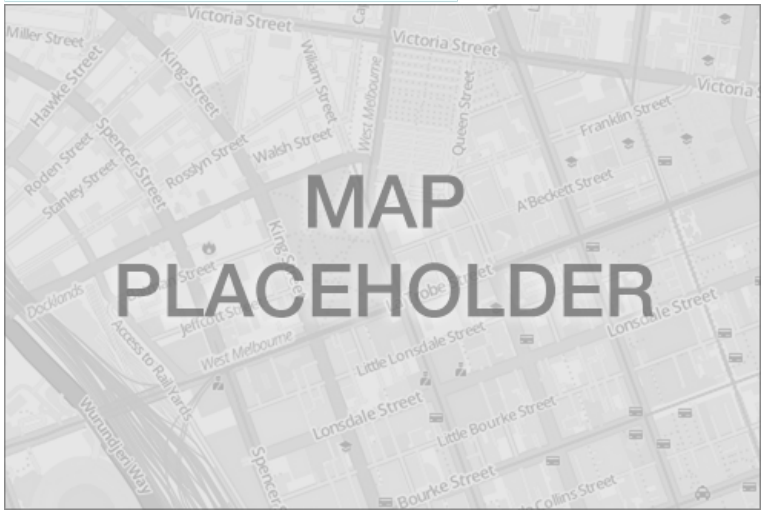
To view our privacy statement, go to Whitsunday Regional Council - Information and Privacy

Applicant Details

Applicant *
Organisation Name

Make sure you provide the same name that is listed in official documentation.

Applicant Primary Address
Address



Applicant Postal Address

Address

Applicant Phone Number *

Must be an Australian phone number.

Applicant Email Address *

Must be an email address.

Primary Contact Details

Primary Contact *

Title | First Name | Last Name

This is the person we will correspond with about this grant.

Position Held in Organisation *

e.g., Manager, Director or Fundraising Coordinator.

Primary Contact Phone Number *

Must be an Australian phone number.

Primary Contact Primary Email *

This is the address we will use to correspond with you about this grant.

Organisation Details

* indicates a required field

What type of organisation are you? *

- ○ Community
- ○ Sport & Recreation
- ○ Arts & Cultural
- ○ Health & Wellbeing
- ○ Educational institution
- ○ Religious or faith-based institution
- ○ Business/Corporate entity
- ○ Aged Homes
- ○ Nursing Homes
- ○ Affordable/Social Housing
- ○ Other:

Please choose the option that best applies to your organisation.

What is your organisation's annual revenue? *

- ○ Less than $50,000
- ○ $50,000 or more, but less than $250,000
- ○ $250,000 or more

Your revenue includes grants, donations, and other fundraising activities, fees for services, sale of goods, interest, royalties and in-kind donations that have been included in your accounts as 'revenue'. The Australian Charities and Not-for-profits Commission (ACNC) has more detailed information here: https://www.acnc.gov.au/tools/topic-guides/revenue

What is your organisation's legal structure? *

- ○ Unincorporated association
- ○ Incorporated association
- ○ Company
- ○ Cooperative
- ○ Indigenous corporation, association or cooperative
- ○ Trust
- ○ Other:

Does your organisation have an ABN? *

- ○ Yes
- ○ No

Applicant ABN *

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	
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	

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 48.5% of any approved grant may be withheld. Download the form from the ATO website.

Please upload completed Statement of Supplier Form. *

Attach a file:

Max 25mb per file uploaded

What is your incorporation number? *

Incorporated Association or Australian Company Number

Donation Request

* indicates a required field

Rates and Charges Donation

Financial relief provided through:

- Rates rebates or concessions
- Water, waste or other Council charges

Please note that rates and charges concessions are administered in accordanace with relevant legislation and Council rating policies.

What is the amount of rates and charges donation being sought? *

Must be a dollar amount.

Rates & Charges

Does the organisation hold a Commercial Liquor License? *

○ Yes ○ No

If yes, please attach a copy of the License
Attach a file:

Rates & Charges

Does the organisation hold a License under the Gambling Machine Act/Keno Act/ Wagering Act? *

○ Yes ○ No

If yes, please attach a copy of the License
Attach a file:

Rates & Charges

The maximum concession for a not for profit organisation holding a "Community Club License" and/or "Community-Other License" will be 50% of the donation they would have received had they not held such a license.

Refer to the relevant Guidelines that outline the concessions available

Supporting Documentation

* indicates a required field

Certificate of Incorporation *
Attach a file:

Constitution/Terms of Reference *
Attach a file:

Certificate of Currency for Public Liability Insurance *
Attach a file:

Last Years Audited Financial Statements *
Attach a file:

Lease Agreement *
Attach a file:

Additional Supporting Information
Attach a file:

Certification

* indicates a required field

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree * ☐ Yes

Name of authorised person *

Title	First Name	Last Name

Must be a senior staff member, trustee or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process.

○ Very easy ○ Easy ○ Neutral ○ Difficult ○ Very difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.