

Welcome to Noosa Council's Grant Program - Floating Land-Boreen Point Component

Eligibility

Applicants must have an in depth discussion about the project and this application with a Floating Land Council Officer prior to proceeding with this application.

Have you met with a Floating Land Council Officer about your project and this application?

☐ Yes
☐ No

What is the name of the Floating Land Council Officer you have met with?

Have you read the guidelines for this grant?

☐ Yes
☐ No

If not, here are the [guidelines](#) for you to read.

Organisation Details

* indicates a required field

Organisation name *

Application contact *

| Title | First Name | Last Name |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

(Director, President or equivalent)

Email address: *

Telephone contact *

Mobile or landline for contact during business hours.

Postal address *

Address

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| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | | |
| Suburb | State | Postcode |
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Website address

Must be a URL

Facebook page

Must be a URL

**Organisation's
Incorporation Number**

Not sure what your incorporation number is - search at this link: [Office of Fair Trading](#)

If you are not incorporated with the QLD Office of Fair Trading please refer to definition of eligible organisations in the [Community Grants Policy](#). You may need another organisation to auspice your application. Discuss this with the Floating Land Project Officer.

Organisation's 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 | |

Must be an ABN

If you have any questions, which are not answered in the policy or guidelines, please call Noosa Council's Floating Land Project Officer on 07 5329 6145.

Auspice Organisation Details

Auspice Organisation

Organisation Name

Auspice Primary Phone Number**Auspice Primary Email****Auspice Position****Auspice Office Address**

Address

Suburb State Postcode

Auspice Primary Website**Auspice organisation Incorporation number****Auspice 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 | |
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| ATO Charity Type | More information |
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| Tax Concessions | |
| Main business location | |

About your organisation

* indicates a required field

What does your organisation do? *

Word count:

Must be no more than 200 words

Upload your organisation's business plan or any strategy documentation.

Attach a file:

Tell us about your organisation's event management expertise? *

Word count:

Must be no more than 100 words

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Event Details

* indicates a required field

Event name *

Event date/s: *

Must be a date or dates between 8 September & 15 October 2017.

Location/s of the event:

*

Must be located in and around Boreen Point.

Attach a site map if relevant.

Attach a file:

Who owns the event site? *

- ☐ Council
- ☐ State Government
- ☐ Australian Government

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☐ Freehold

If you plan to use Council land you can tentatively reserve the site for your event - call Council on 5329 6500.

Do you have permission to hold the event on the site? *

☐ Yes

☐ No

☐ Not Applicable

Upload written permission from owner of the event site.

Attach a file:

Brief description of your event (for promotional purposes): *

Must be no more than 3 sentences

Detailed proposal description. *

Word count:

Must be no more than 500 words.

Outline the concept and program components.

How does the proposal connect to the theme Lost & Found? *

Word count:

Must be no more than 300 words.

Outline the community involvement in the development and delivery of the proposal. *

Word count:

Must be no more than 300 words.

Upload any supporting documents here.

Attach a file:

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Event Management

Outline the schedule of activities included within the proposal. *

Word count:

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Must be no more than 500 words.
In no more than 500 words outline the proposal including the program components.

List the stakeholders and partners involved and describe their contribution: *

Word count:
Must be no more than 200 words.

Upload letters of support from stakeholders and partners.

Attach a file:

Please describe the risks associated with holding this event. *

Word count:
Must be no more than 200 words

Describe how you will mitigate those risks. *

Upload supporting documents

Outline your media and communication plans. *

Word count:
Must be no more than 100 words

Upload any other relevant supporting information here.

Attach a file:

Event management plan, maps, photographs, bios of entertainers etc.

Event Evaluation

* indicates a required field

What are the goals you have set for this event? *

Word count:
Include short, medium and long term goals. Must be no more than 200 words.

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How will you monitor and evaluate the attainment of these goals? *

Word count:

Must be no more than 200 words

Upload relevant further information.

Attach a file:

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Event Budget

* indicates a required field

Important budget requirements:

- All amounts to be recorded here are to be GST exclusive.
- The budget must balance (total income = total expenditure).
- Income: Include the amount you are requesting in this funding application.
- Expense: Written quotations are required for any expenditure items over \$1,000
- Council will not fully fund any event
- In-kind support / volunteer hours are valued at \$30/hour.

Sample Budget

INCOME

\$

EXPENDITURE

\$

Noosa Council Grant request

15000

Artists fees

7000

Cash at bank

224

Performers

3500

Volunteer support (in kind) 35 hours

1050

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Salaries (coordinator and installation)

3874

Gambling Community Benefit Fund – confirmed see attached

4000

Printing

2500

Local business donations – confirmed see attached

500

Materials for workshops

1000

Waste Removal (Sutton Cleaning)

400

Equipment hire

2500

TOTAL INCOME

20,774

TOTAL EXPENDITURE

20,774

Funding Request

**Funding contribution
requested: ***

\$
Must be a dollar amount

Total event cost: *

\$
Must be a dollar amount

Event Budget (all figures are GST exclusive):*

Please don't add commas to figures, e.g. write \$1000 not as \$1,000

Income Description \$

**Expenditure
Description**

\$

| | | | |
|--|--|--|--|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Funding contributions from other sources

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Total secured funding

\$

Please write figure as dollar value i.e. \$5400

Secured funding sources**Total unsecured funding**

\$

Please write figure as dollar value i.e. \$5400

Unsecured funding sources

If you have any questions, which are not answered in the policy or guidelines, please call Noosa Council's Floating Land Project Officer on 07 5329 6145.

Budget uploads

Upload your organisation's most recent financial statement. *

Attach a file:

Attach your own budget document if you wish to.

Attach a file:

Upload any quotations - if required

Attach a file:

For any items of expenditure over \$1,000 you will need at least one quote.

Application Check List

Before you submit:

Please note: If your grant application is ineligible or incomplete it will not be assessed.

Have you answered all the questions?

- ☐ Yes
- ☐ No

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Have you attached the required supporting documentation?

- ☐ Yes
- ☐ No

Have you had your application checked by someone else?

- ☐ Yes
- ☐ No

This is a wise precaution to ensure accuracy and clarity. It is not always possible to detect errors or omissions in one's own work. Incomplete or ineligible applications will be withdrawn from consideration.

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Privacy Statement and Applicant's Declaration

* indicates a required field

Privacy Statement

Council will only use personal information you have provided for the purpose of processing this application and for remaining in contact with you. Council is authorised to collect this information in accordance with the *Local Government Act 2009* and other local government acts. Your personal information is only accessed by persons authorised to do so. Your personal information is dealt with in accordance with Council's Privacy Policy.

Please note the information provided in this application and in any related documentation and discussions may be provided to members of the assessment panel in order to assist Council in assessing your application.

By submitting this application you consent to Council publishing the organisation's name, the event's name, an event description and Council's funding contribution. This information may also be used for promoting Council's funding programs.

On behalf of my organisation I agree that:

My organisation complies with all incorporation requirements of the Office of Fair Trading, State and Federal Governments. *

- ☐ Yes

My organisation has met all previous Noosa Council acquittal conditions. *

- ☐ Yes

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My organisation has no debt to Noosa Council or has entered into a scheduled payment arrangement that is being adhered to. ☐ Yes

If successful, on behalf of my organisation, I agree that:

My organisation has experience in running large public events and understands the risks involved. * ☐ Yes

All necessary permits, insurances and approvals will be obtained prior to claiming Council's funding contribution. * ☐ Yes

All relevant workplace health and safety standards will be met. * ☐ Yes

Noosa Council does not accept any liability or responsibility for any proposed event. * ☐ Yes

My organisation will collaborate with Noosa Council officers. * ☐ Yes

My organisation will accept the terms of the grant in accordance with Noosa Council's guidelines. * ☐ Yes

My organisation will enter into a funding agreement with Noosa Council. * ☐ Yes

My organisation will ensure that the Noosa Council acquittal requirements will be met. * ☐ Yes

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Declaration

I am authorised to complete this application. *

☐ Yes

The statements made in this application are true. *

☐ Yes

Authorised Person's Name *

Title

First Name

Last Name

Position held *

Date of declaration *

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