

# Economic Development Grants 2024/25

## Form Preview

### Are you eligible?

\* indicates a required field

The Town of Victoria Park is here to help you complete your grant application.

Before you start the application browse through the form and speak with the Place Leader of Economic Development by calling 9311 8111 or emailing [business@vicpark.wa.gov.au](mailto:business@vicpark.wa.gov.au)

**Incomplete applications and/or applications received after the closing date may not be accepted.**

**Eligible Applicants - Indicate which category best suits you or your organisation as the Applicant \***

To proceed, please confirm you meet the Eligibility Criteria below. If you do not meet one of the criteria, please speak with the Town's Economic Development team.

- Your initiative will take place primarily within the Town of Victoria Park local government area.
- Your initiative is not a standard operational expense.
- You do not have an outstanding financial debt with the Town.
- You have adequately acquitted all previous grants with the Town.
- You own or hold the appropriate permission to use any intellectual property associated with the initiative.
- You are applying for an amount of \$10,000 or less.
- You have (or are able) to purchase public liability insurance to the value of \$10 million should the initiative require it.

**Please select: \***

- Yes, I meet the criteria above.
- No, I do not meet the criteria above, but have support from the Place Leader to submit an application.

If you do not meet the criteria or do not have the support from the Place Leader DO NOT submit this form.

**Comments (optional)**

**Are you an employee of the Town, an Elected Member, a 'relative' of an employee or Elected Member or a 'closely associated person' (as defined by the Local Government Act)? \***

Yes/no. If yes, please provide details

# Economic Development Grants 2024/25

## Form Preview

### **Upload your public liability insurance (if applicable).**

Attach a file:

### **Conflict of Interest**

The applicant must declare and provide details of any potential or perceived conflicts of interest. Are there any circumstances, arrangements or understandings which constitute, or may reasonably be perceived to constitute, an actual or potential conflict of interest with either the applicant's obligations to adhere to the Funding Agreement or which unduly impact the application? If an Elected Member works for or resides on an applicant's Board of Management or similar governing body, this must be declared as a conflict of interest and addressed below.

### **Please select: \***

- Yes  
 No

### **If yes, please provide sufficient details as to how the actual or perceived conflict of interest arises**

### **Upload your Certificate of Incorporation. \***

Attach a file:

### **Upload letter confirming auspicing by Incorporated Association. \***

Attach a file:

### **Upload Certificate of Incorporation of auspicing Incorporated Association.**

Attach a file:

## Who are you?

\* indicates a required field

### **Use or disclosure of personal information**

Any personal information we collect through victoriapark.wa.gov.au may be used or disclosed for the primary purpose for which it was collected, for example to allow us to

# Economic Development Grants 2024/25

## Form Preview

answer your enquiry or process your transaction. Personal information will be dealt with in accordance with the applicable legislation in Western Australia and consistent with any legal obligation. To view our privacy statement go to [victoriapark.wa.gov.au](http://victoriapark.wa.gov.au)

### Council reporting

The information provided in your application will be provided to Council for approval and made public via a Council agenda. Personal details will not be released publicly.

## Applicant Details

### Organisation Name \*

Individual  Organisation

Organisation Name

First Name

Last Name

### Postal Address \*

Address

### Contact Phone Number \*

### Contact Email \*

### Applicant ABN (unless ATO Statement of Supplier form applicable)

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	<a href="#">More information</a>

# Economic Development Grants 2024/25

## Form Preview

ACNC Registration  
Tax Concessions  
Main business location

Must be an ABN.

### Are you registered for GST?

### ATO Statement by A Supplier

If you do not have an ABN, please supply a "Statement by A Supplier" form from the Australian Taxation Office which can be found here [Statement by a supplier not quoting an ABN](#).

Attach a file:

Upload completed ATO Statement by A Supplier form.

### Applicant Bank Account

Account Name

BSB Number      Account Number

Must be a valid Australian bank account format.

### Auspice Contact Details

If you are auspicing through an Incorporated Association, please provide your auspice organisation contact details.

### Auspice Organisation \*

Organisation Name

### Auspice Postal Address \*

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

### Auspice Primary Contact Person

### Auspice Phone Number \*

Must be an Australian phone number.

# Economic Development Grants 2024/25

## Form Preview

### Auspice Mobile Phone Number

Must be an Australian phone number.

### Auspice Email \*

Must be an email address.

### Auspice ABN (unless ATO Statement of Supplier Form applicable)

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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

### Is your auspice organisation registered for GST?

### ATO Statement by A Supplier

If your auspice organisation does not have an ABN, please supply a "Statement by A Supplier" form from the Australian Taxation Office which can be found here [Statement by a supplier not quoting an ABN](#).

Attach a file:

### Auspice Bank Account

Account Name

BSB Number      Account Number

Must be a valid Australian bank account format.

# Economic Development Grants 2024/25

## Form Preview

### Previous Grants or Funding

List any previous Grants or Funding you've applied for over the last three years with the Town (grant year / project name / successful or unsuccessful / amount received).

### What are you planning?

\* indicates a required field

Demonstrate that the project occurs within the Town of Victoria Park and benefits local businesses (10% weighting)

Answer the below questions to demonstrate that the proposed project will benefit multiple businesses or the local economy in Town of Victoria Park.

#### Initiative Title \*

#### Brief Description of Initiative \*

Word count:

Must be no more than 100 words.

Provide a short description of your initiative - what are you out to do?

#### Anticipated Start Date \*

Must be a date.

#### Anticipated End Date \*

Must be a date.

#### Initiative Location / Address

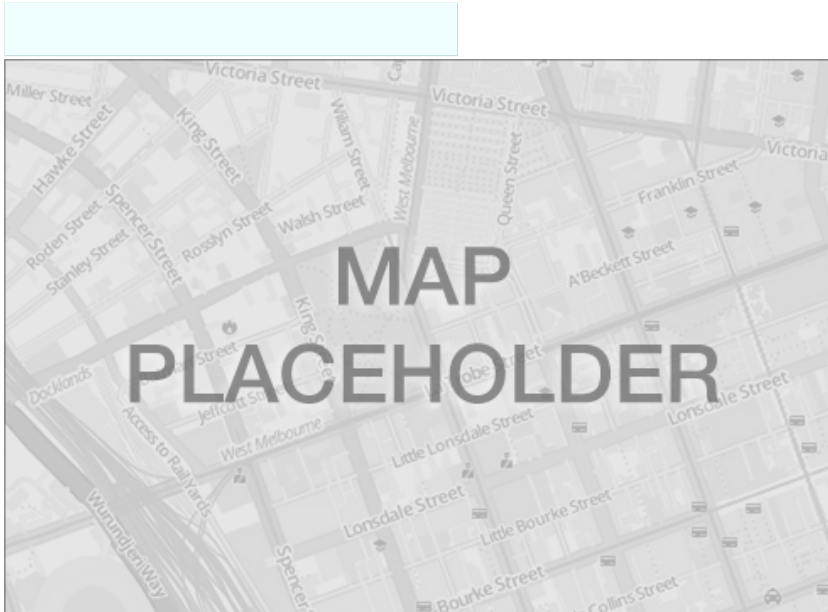
Provide the address and/or describe the location where the initiative will happen. If applicable

#### Pinpoint Location (if applicable)

Address

# Economic Development Grants 2024/25

## Form Preview



### How will you plan and deliver the project?

\* indicates a required field

Demonstrate the feasibility of the Project, activity or program (30% weighting)

Answer the below questions and fill out the budget table at the end of this application to demonstrate the feasibility of the proposed project.

High scores will be awarded to applications that have identified critical risks, budget, external approvals and delivery needs and have realistically accounted for these in their timeframes and budget.

#### **What are the key steps (and associated timeframes) required to make this initiative happen? \***

Please provide an overview of the steps and rough time each will take (ie 2 weeks, 1 month etc)

#### **Please list any risks and how they will be managed. \***

If you aren't sure, please contact your local Place Leader or the Economic Development team to discuss.

#### **How are you promoting or marketing the initiative? (if applicable). How will you acknowledge the Town's contribution? \***

# Economic Development Grants 2024/25

## Form Preview

Write "n/a" if not relevant.

### **Do you need any permissions from third parties, including any statutory approvals? \***

List any needed eg. tenants, building owner, landlord, development approval, road closure, park booking etc. and when these will be secured. Write "n/a" if not relevant.

### **Tell us about your experience managing initiatives like this. \***

Word count:

Must be no more than 100 words.

## How will the project benefit local businesses or the local economy?

\* indicates a required field

### **Demonstrate how your project will benefit local businesses or the local economy(60% weighting)**

Answer the below questions to demonstrate how the proposed project will benefit local businesses or the local economy.

High scores will be awarded to applications that demonstrate the project will deliver exceptional outcomes in relation to one or two listed benefits, or very good outcomes for 3 or more listed benefits.

### **Which of the following benefits will your initiative deliver? \***

- Substantial improvements to the amenity of the public realm that will attract visitors to the area.
- Substantial activation of underutilised or vacant spaces that will attract visitors or investment to the area.
- Provide a unique and visible retail or service offering that will attract visitors to the Town of Victoria Park.
- Foster networking and collaboration between local businesses.
- Provide unique, regionally significant promotion, development or investment for the Town of Victoria Park's local economy.
- Foster innovation industries or innovative business practices in the Town of Victoria Park's local economy.

Your initiative must support at least one of the target benefits. Choose as many as apply.



# Economic Development Grants 2024/25

## Form Preview

**Please provide further information on how your project supports the benefit/s selected above. \***

**Word count:**

Must be no more than 400 words.

We recommend a paragraph of 3 to 6 sentences to ensure sufficient detail is provided.

## How are you funding the project?

\* indicates a required field

**Total Grant Funds Requested (including GST) \***

\$

Must be a dollar amount.

## Initiative Budget

Include income from any other sources of funding or sponsorship.

Please ensure the "Income-Expenditure" below, equals the "Total Grant Funds Requested" above.

Please make sure this is as accurate as possible- if you are awarded a grant, your acquittal will be checked against this budget.

<b>Income Items</b>	<b>\$ (including GST)</b>	<b>Expenditure Items</b>	<b>\$ (including GST)</b>
Funding from other sources or ticket sales etc.		Itemised costs of the initiative you're seeking grant funding for.	
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

## Budget Totals

**Total Income Amount**

\$

This number/amount is calculated.

**Total Expenditure Amount**

\$

This number/amount is calculated.

**Income - Expenditure**

\$

This number/amount is calculated.

# Economic Development Grants 2024/25

## Form Preview

### Quotes

You must supply quotes to support how you plan to spend the grant funding.

For expenditure less than \$5,000, the following is acceptable:

- 1x written quotation, which can include a live online shopping portal; OR
- 2x verbal quotations.

For expenditure greater than \$5,000, the following is acceptable:

- 3x written quotations, which can include a live online shopping portal.

The quotes must include the following information:

- Name, location and ABN or supplier;
- Itemised details of what is being supplied; AND
- Price including GST details.

Expenditure Item 1	Expenditure Item 2	Expenditure Item 3

### In-Kind Contributions

The volunteer hours you or other organisations put into your initiative are important. Please estimate this and any other In-Kind Contributions below. Note - to calculate volunteer hours use \$40 per hour equivalent as recommended by ABS.

Item	Provider	Estimated Value (if applicable, including GST)
		Must be a dollar amount.
		\$
		\$
		\$

If you have anything else you would like to tell us about the budget, please do so here or upload files.

Word count:

#### Upload more information here

Attach a file: