

# Grant Application Form - Round 2 2024

## Form Preview

### Eligibility

\* indicates a required field

Applicants: please note

Before completing this application form, you should have read the [Veolia Mulwaree Trust Grant 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. It is important that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regards to these eligibility criteria, please contact the Veolia Mulwaree Trust office on **(02) 48222786** or via email on **vmt@veolia.com**

### Confirmation of Eligibility

**I confirm that the applicant ...**

- has read and understands the program guidelines
- is able to demonstrate alignment between their project and the aims of this program
- is able to demonstrate financial viability
- has not received **any** funding from the Veolia Mulwaree Trust in the current financial year.
- has the appropriate type and level of insurance for the activities that are the subject of this grant
- Is applying for a project located within at least one of the seven local government areas serviced by the Veolia Mulwaree Trust:

**Local Government Area \***

☐ Goulburn Mulwaree ☐ Upper Lachlan ☐ Former Palerang ☐ Wingecarribee ☐ Shoalhaven ☐ Oberon ☐ Wollondilly

The project must be located within of these local government areas to be eligible to apply to the Veolia Mulwaree Trust

**I confirm that all statements above are true and correct \***

☐ Yes

☐ No

### Part A: Organisation Details

\* indicates a required field

Applicant Organisation Details

**Name of Organisation \***

# Grant Application Form - Round 2 2024

## Form Preview

Organisation Name

Please use the organisation's full legal name. Ensure the name matches the ABN provided below, or in official documentation such as that with the ABR, ACNC or ATO.

**Organisation primary address**

Address

  

**Organisation postal address**

Address

  

**Organisation phone number \***

Must be an Australian phone number.

**Organisation email address \***

Must be an email address.

**Organisation website**

Must be a URL.

**Briefly describe your organisation and its purpose or mission. \***

Word count:

Must be no more than 200 words.

Briefly describe the organisation's history, purpose in the community, activities and numbers of members/participants etc

**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

# Grant Application Form - Round 2 2024

## Form Preview

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 organisation auspiced by another organisation for the purpose of this grant? \*

☐ Yes ☐ No

Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation. The auspice organisation's ABN should be inserted above. If you do not have an auspice you should not apply for this grant.

### Auspice Organisation Details

#### Auspice organisation name \*

Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

#### Auspice primary address

Address

  

#### Auspice postal address

Address

  

#### Auspice primary phone number \*

Must be an Australian phone number.

#### Auspice email address \*

Must be an email address.

#### Auspice website

# Grant Application Form - Round 2 2024

## Form Preview

Must be a URL.

### Primary contact person at auspice organisation \*

Title First Name Last Name

We may contact this person to verify that the auspice arrangement is valid and current.

### Position held in organisation \*

e.g., Manager, Board Member or Fundraising Coordinator.

### Auspice primary contact primary phone number \*

Must be an Australian phone number.

### Auspice primary contact office phone number

Must be an Australian phone number.

### Auspice primary contact email address \*

Must be an email address

### Please attach a letter from the auspice organisation confirming that the auspice arrangement is valid and current. \*

Attach a file:

The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

## Financial Statements

### Please provide a copy of, or link to, your organisation's most recent financial statement or attach a copy of your most recent annual report.

If your organisation does not produce an annual report, please provide us with your most recent financial statements (may include a Profit and Loss Statement / Statement of Financial Performance and a Balance Sheet / Statement of Financial Position).

### Upload Financial Statements

Attach a file:

### Or provide web link to annual report:

Must be a URL.

# Grant Application Form - Round 2 2024

## Form Preview

### Application Contact

#### 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, Board Member, Treasurer etc

#### Phone number \*

Must be an Australian phone number.

#### Email address \*

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

### Head of Organisation

#### Head of Organisation

Title First Name Last Name

#### Position in Organisation

For example, General Manager, Principal, President

#### Phone Number

Must be an Australian phone number.

Must be a different phone number to application contact

#### Email Address

Must be an email address.

Must be a different email address to the application contact

### Previous Veolia Mulwaree Trust Funding

**Has your organisation previously applied to the Trust for funding (either successfully or unsuccessfully)? Please provide details. \***

# Grant Application Form - Round 2 2024

## Form Preview

Please include previous application reference numbers if available. Organisations or project sites which have received funding from the Veolia Mulwaree Trust in the previous 12 months may be ineligible to apply. Please check with the Veolia Mulwaree Trust office if unsure before applying.

### Part B: Project Details

\* indicates a required field

#### Project title: \*

Provide a name for your project. Your title should be short but descriptive

#### Please provide a short summary of the project \*

#### Word count:

Must be no more than 200 words.

Be descriptive, but succinct. Include a brief summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what effects you expect to result from your activities (outcomes). Go to the Funding Centre's Answers Bank at <https://www.fundingcentre.com.au/answersbank#Qu1> if you need some ideas about how to frame your response. Photos, diagrams, plans and other documents to support the project may be attached below.

#### Location of Project \*

Provide full address of project site

#### Which organisation owns the project site? \*

If the applicant organisation is not the owner of the site, written consent for the project from the site owners (eg Council, Crown Lands etc) must be attached to the application below.

#### Project Consent from site owner (if required)

Attach a file:

#### Does the project require development approval from Council or have an approved exemption? \*

- ☐ Development Approval - attach below
- ☐ Exempt from approval - attach exemption confirmation from council below
- ☐ Not applicable - the project does not include any construction, building, infrastructure or capital works

Please Note - The development of any new assets (such as shade structures, playgrounds, sheds, extensions etc) will require consultation with the local council. Applications for capital works projects without written Council approval or written approval exemption will be ineligible. Public schools require written approval from NSW Department of Education.

#### Please upload Development Approval or Approved Exemption below (if required)

Attach a file:

# Grant Application Form - Round 2 2024

## Form Preview

### Project Timeframe

**Anticipated start date \***

Must be a date and no earlier than 1/8/2024.

**Anticipated end date \***

Must be a date and no earlier than 1/8/2024.

### About the project

**Project rationale: What is the need and how will you address it? \***

Tell us why your initiative is needed, and why you believe the activities you propose will produce the outcomes you seek. Provide statistics/evidence (where available) of both the need and the link between the work you will do and the outcomes you seek. Go to the Funding Centre's Answers Bank at <https://www.fundingcentre.com.au/answersbank#Qu2> if you need some ideas about how to frame your response.

**What are the expected outcomes of the project? \***

Describe three things you want the project to achieve in terms of benefits for the community

**Please attach plans, site map, photos and any additional information to support the project**

Attach a file:

### Community Support

**What evidence do you have that this project/program has community support?**

Evidence of community support is generally highly regarded as projects with community buy-in tend to be more successful. The Veolia Mulwaree Trust prioritises project applications which include multiple stakeholders demonstrated by financial contributions from the applicant and other funding sources. Go to the Funding Centre's Answers Bank at <https://www.fundingcentre.com.au/answersbank#Qu7> if you need some ideas about how to frame your response.

**Please upload letters of support (if available/relevant)**

Attach a file:

A maximum of 3 letters of support can be attached

### Acknowledgement of funding

# Grant Application Form - Round 2 2024

## Form Preview

**If this application is successful, how will your organisation recognise the Veolia Mulwaree Trust's contribution to the project?**

For example, signage, media coverage, opening event etc

### Part C: Project Budget

\* indicates a required field

#### Income and Expenditure

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have received. All amounts should be GST inclusive.

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns, Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'. Examples of expenses could include 'concrete slab', 'seating', 'shade shelter'. Check the Veolia Mulwaree Trust guidelines to ensure expenditure is eligible.

The Veolia Mulwaree Trust prioritises applications which include multiple stakeholders demonstrated by financial contributions from the applicant and other funding sources valued at more than 50% of the project cost. Written confirmation of co-funding, detailing the source, nature and amount of the contribution, must be attached. All contributing funds for the project from other sources must be approved by the round closing date.

**Do not include** the grant funding requested from the Veolia Mulwaree Trust. This will be calculated automatically in the grant requested field below.

Use the 'Notes' column for any additional information you think we should be aware of.

Do not include in-kind labour, or the organisation's staff or administrative costs in this table. These items may be outlined in Section 5 below.

Income Description	Income Type	Income Amount (\$)	Income Confirmation
		\$	
		\$	
			All project co-funding must be confirmed in writing.

Expenditure Description	Supplier	Expenditure Amount (\$)	Preferred Quotes
		\$	
		\$	
			Please attach preferred quotes for all expenditure items

#### Budget Totals



# Grant Application Form - Round 2 2024

## Form Preview

### Total Income Amount

\$

This number/amount is calculated.

### Total Expenditure Amount

\$

This number/amount is calculated.

### Total Grant Requested

This number/amount is calculated.

### Please attach second 'not preferred' quotes for all expenditure items listed in budget table \*

Attach a file:

Important Note: A minimum of two current quotations for each expenditure item listed in the project budget must accompany this application. Quotations must be from different suppliers and must be comparable, i.e. for the same item or work. The preferred supplier for each item should be noted in the project budget and on the quotation. Applications submitted without current and relevant quotes will be deemed ineligible. Alternate quotes for all expense listed on the budget table must be attached here. Attach as.pdf or .jpg file only

## In-kind Contributions

### What other in-kind (non-financial) inputs will you need in order to successfully carry out this project?

In-kind (non-financial) inputs could include staff/volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions and other types of support.

## Funding from other sources

### Has your organisation applied, successfully or unsuccessfully, to any other organisation for funding toward this project? Please provide details.

## Budget Summary

### % of Project Requested

This number/amount is calculated.

Please Note: The Trust will not fund 100% of any project. Priority is given to applications which include multiple stakeholders demonstrated by financial contributions from the applicant and other funding sources valued at more than 50% of the project cost

## Part D: Certification

# Grant Application Form - Round 2 2024

## Form Preview

\* indicates a required field

### Certification

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 in the letter of offer.**

**I agree \***

☐ Yes

☐ No

**Name of authorised person \***

Title

First Name

Last Name

Must be the head of the organisation, board member or appropriately authorised volunteer

**Position \***

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

**Contact phone number \***

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

**Contact Email \***

Must be an email address.