**Stronger Communities Programme**

**PROJECT PROPOSAL FORM**

This form will assist the Member and his/her Community Consultation Committee to identify priority projects which may be eligible for funding under the Stronger Communities Programme.

Priority projects identified through this process will separately be invited to complete an online application.

**Completed forms are due on 23 August 2019**

Please return this form via email to:

[mark.coulton.mp@aph.gov.au](mailto:mark.coulton.mp@aph.gov.au)

Or

Via post to:

‘Stronger Communities Programme’

Office of the Hon Mark Coulton MP

Suite 3/153 Brisbane Street

DUBBO NSW 2830

If you have any questions, these should be directed to my Dubbo Office on 02 6882 0999.

**Eligibility Checklist**

*Please refer to the Programme Guidelines and additional guidance materials at:* <https://www.business.gov.au/assistance/stronger-communities-programme>

Funding is sought for a small capital project.

The funding requested is between $2,500 and $20,000.

The project will receive a matching contribution, either in cash or in-kind, from the organisation responsible for the project and/or third party supporters.

The project is located within the Parkes electorate

The organisation seeking funding has an ABN, and is either a local council or a not-for-profit which is not owned by a state or territory government.

The project will improve local community participation, cohesion and/or contribute to community vibrancy and viability.

**Organisation Details**

1. Name of your Organisation

|  |
| --- |
| Click here to enter text.  gg |

1. Australian Business Number (ABN)

|  |
| --- |
| Click here to enter text. |

1. Is your Organisation a not-for-profit?

|  |
| --- |
| Click here to enter text. |

1. Physical Address

|  |  |
| --- | --- |
| Street Address Line 1 | Click here to enter text. |
| Street Address Line 2 | Click here to enter text. |
| Suburb/Town | Click here to enter text. |
| State/Territory | Click here to enter text. |
| Postcode | Click here to enter text. |
| Website | Click here to enter text. |

1. Postal Address

|  |  |
| --- | --- |
| Postal Address Line 1 | Click here to enter text. |
| Postal Address Line 2 | Click here to enter text. |
| Suburb/Town | Click here to enter text. |
| State/Territory | Click here to enter text. |
| Postcode | Click here to enter text. |

1. Contact Details

*Head of your Organisation*

|  |  |  |  |
| --- | --- | --- | --- |
| Title (eg. Mr/Mrs/Ms/Dr) | Click here to enter text. | | |
| First name | Click here to enter text. | | |
| Surname | Click here to enter text. | | |
| Position | Click here to enter text. | | |
| Telephone | (w)Click here to enter text. | (m)Click here to enter text. | (f)Click here to enter text. |
| Email Address | Click here to enter text. | | |

*Project Manager (correspondence will be emailed to this address)*

|  |  |  |  |
| --- | --- | --- | --- |
| Title (eg. Mr/Mrs/Ms/Dr) | Click here to enter text. | | |
| First Name | Click here to enter text. | | |
| Surname | Click here to enter text. | | |
| Position | Click here to enter text. | | |
| Telephone | (w)Click here to enter text. | (m)Click here to enter text. | (f)Click here to enter text. |
| Email Address | Click here to enter text. | | |

**Project Details**

1. Project Title

*What is the name of the project?*

*Example:*

* *Harry Oval Lighting Upgrade;*
* *Broadfield Softball Club – Purchase of Equipment; or*
* *Broadfield Community Centre Kitchen Replacement.*

|  |
| --- |
| Click here to enter text. |

1. Project description

*Brief describe what the project will physically deliver. (150 words max)*

*Example:*

* *The project will replace the existing kitchen in the Community Centre and include the purchasing of a new ridge, stove and microwave; or*
* *The project will upgrade Harry Oval by replacing 100 square meters of existing turf, four new light poles and lights and upgrade dressing sheds by replacing the existing shower and toilet facilities.*

|  |
| --- |
| Click here to enter text. |

***Eligibility Guidance***

*The programme is intended for small capital works. Examples of projects that may be funded include:*

* *sporting facility upgrades including new scoreboards, seating, new turf, fit-out out of changes rooms, new canteen, new lights, upgrade water systems, gymnasiums, skate parks.*
* *fit-out of community centres, including kitchen upgrades and equipment purchases such as computers, TVs and furniture and fittings.*
* *machinery and equipment, including items such as barbeques, lawnmowers, buses.*

*Examples of projects that are unable to be funded include:*

* *payment of salaries for existing staff or contractors;*
* *recurring or ongoing expenditure such as annual maintenance, lease payments, electricity or gas expenditure;*
* *projects that seek funding to stage events, exhibit a display or for filming;*
* *projects to undertake studies or investigations; or*
* *purchase of land or buildings.*

1. Project Outcomes

*Briefly describe how this project will improve local community participation, cohesion and contribute to community vibrancy and viability. (150 words max)*

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| --- |
| Click here to enter text. |

1. Project location

*Where will the project be located? If a street number is not known, please provide the Lot number.*

|  |  |
| --- | --- |
| Street Address Line 1 | Click here to enter text. |
| Street Address Line 2 | Click here to enter text. |
| Suburb/Town | Click here to enter text. |
| State/Territory | Click here to enter text. |
| Postcode | Click here to enter text. |
| Longitude, if known | Click here to enter text. |
| Latitude, if known | Click here to enter text. |

**Financial Details**

1. Project Cost

Total project cost GST Exclusive

|  |
| --- |
| Click here to enter text. |

Total project cost GST Inclusive

|  |
| --- |
| Click here to enter text. |

1. Grant Requested

*How much Stronger Communities funding are you seeking GST Exclusive and GST Inclusive? Grants of between $2,500 and $20,000 are available under the Programme. If your organisation is not GST registered, please fill in the GST inclusive amount only.*

Grant amount sought GST Exclusive

|  |
| --- |
| Click here to enter text. |

Grant amount sought GST Inclusive

|  |
| --- |
| Click here to enter text. |

1. Other contributions

*Please indicate the name of the funding partner and amount. If in-kind, please detail the form of the contribution.* *In-kind labour should be calculated at an average hourly rate of $39 for volunteer labour, and $45 for professional advice.*

|  |  |  |
| --- | --- | --- |
| Contributor | Value of contribution | Cash or In-kind |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. |

**Construction Projects Only (Q14 – Q17)**

1. Key Dates (NB: Projects must be completed by 30 June 2020).

|  |  |
| --- | --- |
| Estimated Project Start Date: | Click here to enter text. |
| Estimated Project Finish Date: | Click here to enter text. |

1. Environmental and Planning approvals

*Does the project require any licenses or approvals before it can commence (i.e. building and planning approvals, rezoning or an Environmental Impact Statement).*

No:

Yes: Please give details below

|  |  |  |  |
| --- | --- | --- | --- |
| Name of Permit | Issuing Authority | Status of Permit | Issue/Expected Issue Date |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |
| Click here to enter text. | Click here to enter text. | Click here to enter text. | Click here to enter text. |

1. Infrastructure maintenance

*Describe how the infrastructure will be managed and maintained into the future - (i.e. who will manage and maintain the project, where will the funding come from).*

|  |
| --- |
| Click here to enter text. |

1. Asset Ownership

*Provide details of who will own the asset on completion.*

|  |
| --- |
| Click here to enter text. |

**Authorisation**

|  |  |
| --- | --- |
| Authorised Officer name | Click here to enter text. |
| Position Title | Click here to enter text. |
| Organisation name | Click here to enter text. |

I Confirm that:

* *I am a person authorised on behalf of my organisation to submit this project proposal.*
* *The information provided in this form is complete and correct.*
* *To the best of my knowledge, I am not aware of any actual, apparent or potential conflicts of interest that would prevent my organisation from proceeding with the proposal outlined.*

Signed:....................................................................................................................................................

Date: / /