### Other Financial Assistance Grant 2024/2025

#### Background

Council can provide financial assistance to for profit, local not-for-profit, incorporated and registered charitable organisations, and community organisations delivering services to and providing activities for residents of the Hills Shire.

Individuals, not-for-profit organisations, and commercial /for profit organiations MUST be based in The Hills LGA.

Individuals, not-for-profit community organisations and commercial/private organisations can apply under this category for dollar-for-dollar match funding amounts in accordance with the requirements of Section 356 and may require being placed on public exhibition for 28 days following Council endorsement.

Not-for-profit organisations will need to provide explanation why application is being made through this program and not via the Annual Community Grants program.

Funding over \$2,501 can be applied for and is subject to conditions. **Projects must be delivered in the Hills Local Government Area.** 

The event/ program/ activity must be a future date - not retrospective grant funding is permitted.

Applications will need to comply with the **Community Grants Policy**.

#### **Previous Funding**

Have you received a grant this financial year from any of the 3 categories below:-
2.1 - Minor Community Grant
2.2 - Annual Community Grant
2.3 - Other Financial Assistance

If YES excluding Auspice arrangements you are ineligible to apply in this grant round

### **Application Checklist**

☐ YES ☐ NO

Please prepare the following documents for inclusion in your application submission.

	u may use the below checklist to tick off the forms as your collect them. You ll be asked to upload these documents in the application form.
	Organisations Annual Report (if applicable)
	Audited financial statements completed by a Chartered Accountant or Certified
Pra	acticing Accountant
	Certificates of Currency for Public Liability Insurance - minimum of 20 million coverage
	Details of any partnerships in delivering the project including letters of support.

<ul> <li>☐ If raising funds for charity, provide a supporting letter from the nominated Charity.</li> <li>☐ Project timeline information including a project plan.</li> <li>☐ A comprehensive and complete budget showing all income and expenditure along with match funding details.</li> <li>☐ Two quotes for each item over \$2,000, applicable for all items of expenditure.</li> </ul>
<ul> <li>Conflict of Interest disclosure forms for all applicants and all members of organising committee.</li> <li>If applicable have you provided an explanation as to why you have not applied through the Annual Community Grant Round.</li> </ul>
Application
* indicates a required field
Applicant Details
Organisation Name Organisation Name
Applicant Name *
Applicant Position *
Applicant Primary Address * Address
Suburb State Postcode  Must be Address Line 1. Suburb (Town State (Previous and Postcode are required)
Must beAddress Line 1, Suburb/Town, State/Province, and Postcode are required
Applicant Phone Number *
Must be an Australian phone number.
Applicant Primary Email *
Must be an email address.
Applicant ABN

Page 2 of 12

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 <u>More information</u>
ACNC Registration
Tax Concessions
Main business location
Please upload Certificates of Currency for Public Liability Insurance (if applicable) Attach a file:  You are required to hold current Public Liability Insurance of minimum \$20million - Mandatory for
organisations.
Project details
The below questions are about the project that you are seeking funding for.
Ducing to Title *
Project Title *
Project little *
Provide a name for your project. Your title should be short but descriptive
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Provide a name for your project. Your title should be short but descriptive  Project Location - Mandatory *  Must be located in The Hills Local Government Area
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Project Location - Mandatory *  Must be located in The Hills Local Government Area  Project Start Date *  Must be a date.  Project End Date *  Must be a date.  Please upload a detailed Project timeline including a Project Plan

Project Description - include key milestone dates. What is the Project about? How does your project / program reflect community focus?  $\star$ 

Word count: Must be no more than 150 words.
Project Innovation - Outline how the Project is original, why done and why Council should support it? *
Word count: Must be no more than 150 words.
Project Reach - explain how residents from The Hills LGA wi project. Provide evidence of research or data on your audie reach them. *
Word count:  Must be no more than 150 words.  Provide evidence of research or data on the proposed numbers
Capability Statement - Demonstrate your operational capab project. Include evidence of previous project delivery. Can y of similar successful projects? *
Word count: Must be no more than 150 words.
Social and Participation Impact - Explain how the proposed social outcomes for residents of The Hills LGA. How will you of your project have been achieved. *
Word count: Must be no more than 200 words.

Page 4 of 12

If you are accessing the Not for Profit Venue Access Fee through the Fees and Charges you must include Council's contribution for room hire in your budget.

Venue Access Fee & Budget

This contribution will form part of your overall funding request.

You will need to demonstrate in your budget the venue hire benefit you are receiving. EG: Discounted hire via Venue Access Fee.

\*\* All council venue hires noted in the application will be validated with council's venues dept.

#### **Project Budget**

The below questions relate to the budget for the project that you are seeking funding for.

Your request for an Other Financial Assistance Grant must be an amount no greater than 50% of your total expenditure budget as Council requires dollar matching or in-kind. For example, if you are applying for \$15,000 in Council grant funding, your total expenditure budget including the value of in-kind must be a minimum of \$30,000.

- \*\* Grant funding cannot be used for normal ongoing organisational expenditure and/or equipment that would normally be funded by the operations of the organisation on an ongoing basis.
- \*\* Detailed individual line items of expenditure and revenue and the total budget cost for the project including details of matching dollars MUST be provided.
- \*\* Mandatory All single items expenditure \$2000 or more MUST include two (2) quotes.

#### \*\*All quotes MUST:

- display the companies/ vendors ABN number.
- include a vendor quote number
- be dated within the last three months.
- include contact details of the vendor/ business.
- \*\* Please note you may be requested to provide quotes for items under \$2000 to provide transparency.

#### In-kind

In-kind resources are not ordinarily considered part of the formal matching budget and an explanation of any is to be articulated in the supporting documentation. An exception to this requirement may be granted if a community group can provide an adequate explanation to the assessment panel of why this is not achievable.

Are	e you	re	questin	g in-kir	าd suppor	t within	your	budget	*
	Yes		No						

If YES please include an adequate explanation to the assessment panel as to why you are requesting in-kind support, how it was calculated and include the value in your income/expenditure tables

Must be no more than 20	) words		
What percentage of	your income bud	get is made up from	in-kind resources?
Must be a number.			

#### Applicant / Committee Renumeration

Please complete this section if you the applicant or any of your organising committee will be renumerating from this project / event / program.

Renumeration is any salary / wages / fees that will be paid to you the applicant and/or staff during this project.

Please attach a word doc with the name, phone number and email address of all persons from your organiation who will be renumerating from this project.

Attach a file:

, tecacin a mici	
Upload your document here.	
opioda your document nere.	

#### Please provide how much of the grant funding will be used for renumeration.

Must be a number.

Renumeration is any salary / wages / fees that will be paid to you the applicant and/or staff during this project.

### Project Income

Project Income is where you list where you are getting the money to pay for the project you are seeking funding for. Examples of project income might include Council grant, ticket sales, fundraising, self-funded, sponsorship, etc.

- \*\*The grant amount you are requesting from Council MUST be included in your Income column.
- \*\*Dollar-for-dollar match funding MUST be demonstrated in your Income column.
- \* If you state in your budget: self-funded you will need to demonstrate where these funds will be sourced from EG; bank account.

The income and expenditure tables below must show the total value of income and the expenditure table must show the same value of how it is being spent.

An example is provided below:

Project Income	\$ Amount
eg. Council Grant	\$15,000.00
eg. Ticket Sales	\$10,000.00
eg. Dollar-for-dollar match funding	\$5,000.00

#### Council Grant Amount \*

eg, \$30,000.00

Must be a dollar amount.

What is the total financial support you are requesting from Council?

#### **Project Expenditure**

Project Expenditure is where you list the costs incurred to deliver the project that you are seeking funding for.

Examples of project expenditure might include venue hire, audio visual equipment, catering, etc.

### \*\* Mandatory - All items of expenditure of \$2000 or more MUST include two (2) quotes.

#### \*\*All quotes from vendors MUST:

- include a quote number
- be dated within the last three months.
- include contact details of the vendor.

### \*\* Please note - you may be requested to provide quotes for items under \$2000 - to provide transparency.

An example is provided below:

Project Expenditure	\$ Amount
eg. Venue Hire	\$15,000.00
eg. Audio Visual Equipment	\$5,000.00
eg. Stage Hire Equipment	\$5,000.00
eg. Catering	\$5,000.00

#### **Budget Totals**

### Your budget MUST balance (TOTAL CASH INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT).

This enables Council to ensure that all funds for the project are accounted for.

Total Project Income Amount *	Total Project Expenditure Amount *	Balance (Income - Expenditure) *	
\$	\$	\$	
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated. This number should equal	

#### Quotes for your project

Council has a duty to ensure that funding is spent responsibly.

### Any and all line items of expenditure over \$2,000 require two quotes to be provided for that line item as part of your application.

This is a requirement regardless of whether the funding from Council is intended to cover this expense or otherwise.

- \*\* Mandatory All single items expenditure \$2000 or more MUST include two (2) quotes.
- \*\*All quotes are to be from existing organisations with an ABN
- The quotes MUST include a quote number
- The quotes MUST be dated within the last three months.
- The quotes MUST include contact details of the organisation.
- \*\* Please note you may be requested to provide quotes for items under \$2000 to ensure transparency.

Failure to provide quotes - addressing all requirements above - may result in your

application not being passed to the panel for assessment.
Upload any quotes you have for items of expenditure over \$2,000 to support your project budget Attach a file:
If you are unable to provide two quotes, you must discuss the budget evidence requirement with Council's Grants Officer immediately and no later than 14 days business days before the program closes. Email: grants@thehills.nsw.gov.au If you are unable to provide quotes, please provide a reason why. Only very exceptional circumstances will be considered as to why quotes have not been provided as requested.
Word count:
word count:
Project Viability
If Council does not provide 100% of the financial assistance requested, will this project proceed?
Funding requests over \$7,501
Are you requesting funding over \$7,501 *  ○ Yes
Additional requirements for funding requests over \$7,501 for

organisations

**MANDATORY:** Applicants must provide profit and loss statements and balance sheets covering 24 months and certified by an accredited independent accountant or auditor.

If your organisation has been registered for less than 24 months, applicants must provide current profit and loss statements and balance sheet prepared by an accredited independent accountant within the last 3 months.

Please upload Audited financial statements Attach a file:
Please upload Audited balance sheets Attach a file:
Supporting Documentation
* indicates a required field
Organising Committee & Applicant
For transparency we require Organising Committee Members and Organisation Board Member <b>who have</b> a conflict-of-interest with The Hills Shire Council to complete a Conflict-of-Interest declaration form.
*Only members who have a conflict are required to complete the form.
*If you do not have a conflict, you are no longer required to complete a form.
How many people are involved in the Organising Committee for the project (including the applicant) *
Must be a number.
Do any members of the Organising Committee or Board Members have a conflict of interest?  ☐ Yes ☐ No
Only Committee members and Board members who have a conflict of interest are required to complete a declaration form.
How many members of your Organising Committee or Board Members have a conflict-of-Interest with The Hills Shire Council?
Must be a number. Only those with a conflict are required to submit a Conflict-of-Interest declaration form.
Conflict of Interest  IF APPLICABLE: Please complete a conflict-of-interest form.

**Conflict of Interest Forms can be completed here:** Conflict-Of-Interest Form

If you have members of your organisation that are required to complete the form, please click on the link above, copy the link in the URL and email the declaration form to the member.

Once the form has been completed, the form will be sent to the council grant administrator to attach to your application.

The person completing the application (applicant) on behalf of your organisation is no longer required to attach the form to the application - this will be completed for you by the council administration.

Previous Council Funding Acquittals

			10 4 31111111			
Has your Council?		n acquitte	ed any an	d all previous f	funding received from	
○ Yes		O I	No		<ul><li>No previous funding received</li></ul>	
exempti		approved	by counc		evious grant. Unless priculs must be completed pr	
No more th	nan 100 words					
Partner	ships					
	receiving spo			ns or partnerin	g with another	
○ Yes			., .	○ No		
Please ide	•	ace below	any spons	orship funding, c	donations or partnerships fo	r
	e the details of f this section.	f more thar	one partr	nership you will r	need to click <b>Add More</b> at t	:he
If you are supportin	_	ding - you <b>I</b>	MUST have	e the approved f	unding amount stated in the	e
The appro	oved funding a	mount <b>MU</b>	ST be incl	uded in your Inc	ome column in your budget	: <b>.</b>
goodwill Individe	or equipmen		_	enefit from - t	his included money,	
Title	First Name	Last N	ame			
<b>Partner</b> Address	Primary Addı	ess *				
Suburb	State Post	code				
Must beAd	dress Line 1, Su	burb/Town,	State/Provir	nce, and Postcode	are required	

Primary Phone Number *
Must be an Australian phone number.
Primary Email *
Must be an email address.
Role in project *
Must be no more than 100 words.
Funding Committed *
\$ Must be a dollar amount.
Please include financial contribution in your budget.
Please upload a letter of support from the organisation * Attach a file:
Fundraising
Do you expect to raise funds for a charity (other than your organisation)? *  ○ Yes  ○ No
How much do you expect to raise for the charity(s)
How will the funds raised be used?
Please upload supporting letter from the charity(s) you are fundraising for agreeing to accept the donation  Attach a file:
To be completed by Not-For-Profit Organisations
If your organisation is not-for-profit please provide a detailed description as to why you did not apply through the Community Grants Program
Word count:

### Privacy Notification & Acknowledgement

All personal information obtained by Council will be collected and stored in conjunction with the Privacy and Personal Information Act (PPIPA) 1998.

The intended recipients of the personal information are:

- Officers within Council;
- Data service providers engaged by Council;
- Any other agent/contractor of Council; and
- Statutory Authorities.

Council has collected this personal information from you in order to process your application.

The supply of the information by you is voluntary. However, if you cannot provide or do not wish to provide the information sought, Council may be limited in dealing with your request.

You may make application for access or amendment to information held by Council. You may also make a request that Council suppress your personal information from a public register. Council will consider any such request in accordance with PPIPA.

Council is to be regarded as the agency that holds the information.

Enquiries concerning this matter can be addressed to the Public Officer on 9843 0159.

### I agree and accept the above Privacy Notification \*

Yes

### **Enquiries**

Community and Events Team

Email: grants@thehills.nsw.gov.au