



Shire of Mundaring

General Purpose Community Quick Grant Up to \$500

Name of your group _____

Must be submitted to the Shire by

4pm Monday 21 September 2009

Please complete all sections of this form and return by 4pm
on the due date. See last page for return details.

ORGANISATION DETAILS

Name of organisation / Community group:

Date established:

Postal address:

Incorporated: Yes No

Is your organisation registered for the GST? Yes No

ABN:

CONTACT PERSON DETAILS

Contact person:

Postal address:

Email:

Telephone:

Fax:

Mobile:

Project title: _____

Have you discussed your project with the Community Development Advisor (Grants)?

Yes No

If no, please contact Community Development Advisor (Grants) on 9290 6678 to discuss your proposed application.

1. Project overview: Describe your project and include details of how the funds which you are applying for are to be used (300 words or less). Please attach a separate page if necessary.

2. Please provide a project budget.

Amount requested from Shire \$ _____ (GST Inclusive)

Income (GST Inclusive)	Expenditure (GST Inclusive)

3. How does your project/event benefit the community of the Shire of Mundaring?
(200 words or less).

4. Organisations that obtain a Shire of Mundaring grant are generally encouraged to publicly acknowledge the support they received. This helps people understand one of the ways Shire revenue is spent on the local community. It may also encourage other community organisations undertaking similar activities to consider approaching us for a grant. The shire can provide signage and banners to display at events.

How does your organisation/group propose to acknowledge the Shire of Mundaring for their financial contribution to your project/service? (200 words or less).

5. Will your group be contributing resources to the project? For example: financial, volunteers, labour (100 words or less).

7. What measures will you use to determine whether your project has been successful? For Example: number of people attending the event; purchase of equipment (200 words or less).

Please note:

If your application is successful and the project proceeds, approval of funding does not, in any way, exclude applicants from having to obtain the appropriate permits, consents or approvals required by the shire's planning, building or health departments.

AKNOWLEDGEMENT

I am authorised to make this application on behalf of the organisation I represent. The information given is true and correct.

I understand that I may be required to supply further information prior to consideration of this application, and should the organisation be successful in gaining funding an acquittal report will be submitted to the Shire of Mundaring within three months of the project finishing.

I understand that monies received as a result of this application must be used in accordance with the Shire of Mundaring's Policies and Strategic Plan 2007 (available at: www.mundaring.wa.gov.au) and the General Purposes Community Grant Funding Guidelines.

I understand that any variations to the original request for funding will need to be addressed to the Community Grants Advisor at the Shire of Mundaring.

Signature:

Date:

Print Name:

Please deliver your completed application to:

	<p>Mail to: Sally Bravos A/Community Grants Shire of Mundaring 7000 Great Eastern Hwy MUNDARING 6073</p>	<p>Deliver to: Customer Service Reception Shire of Mundaring 7000 Great Eastern Hwy MUNDARING WA 6073 Attn: Sally</p>
	<p>Email your signed/scanned copy to: Sally Bravos using email address cda3@mundaring.wa.gov.au</p> <p>If using email, please request a read receipt or alternatively, phone 9290 6678 to ensure your email has been received.</p>	

<p>FOR FURTHER INFORMATION OR SUPPORT IN COMPLETING YOUR APPLICATION:</p>	
<p>Contact:</p>	<p>Sally Bravos Acting Community Development Advisor Grants</p>
<p>Telephone:</p>	<p>(08) 9290 6678</p>
<p>Email:</p>	<p>cda3@mundaring.wa.gov.au</p>