# N:\Community\REC FAC\WEST\KLP\Dry\Marketing\CoK Logos\COFK-LOGO-CMYK.jpgDE-04 ECONOMIC DEVELOPMENT GRANT

# SCHEME 2020 APPLICATION FORM

Please read the DE-04 Economic Development Grant Scheme Policy & Guideline documents before completing this application. It is recommended that you contact the City Growth Team on 9186 8555 to discuss your initiative prior to its submission.

|  |
| --- |
| **SECTION 1 - APPLICANT DETAILS** |
| **Business Name:** |
| **Type of Organisation e.g. Sole Trader, Company:** |
| **Title of Initiative/Project:** |
| **Contact Person for Project:** |
| **Position Held:** |
| **Postal Address:** |
| **Office Hours Telephone:** | **Mobile:** |
| **Email Address:** | **Website Address:** |
| **Australian Business Number:** |  |
| **Total Project Budget:** |  |
| **Amount requested (Up to 50% of total project budget): $** |
|  |

|  |
| --- |
| **SECTION 2 - ABOUT YOUR ORGANISATION** |
| **Please describe your organisation structure, and primary business objectives:**  |
|  |
|  |

|  |
| --- |
| **SECTION 3 - PROJECT/ACTIVITY/DETAILS** |
| **3.1 Please describe the project you ae planning to undertake and outline your objectives:** |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| **3.2 Please provide a clear plan for delivery of your project including key dates/timelines. If you have a project timeline, calendar or GANTT Chart to attach please do so.** |
|  |
|  |
|  |
|  |
|  |
|  |
|  |
| **3.3 Please demonstrate the need and demand for the activity/project (Provide any economic impact data to support your case)** |
|  |
|  |
|  |
|  |
|  |
|  |
| **3.4 How does this align to the City of Karratha’s strategies (please be specific)?** |
|  |
|  |
|  |
|  |
|  |
|  |
| **3.5 What is the potential economic impact of this activity / project and how will the success be measured?** |
|  |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| **3.6 Please demonstrate how this activity / project represents good value for money for the City of Karratha?** |
|  |
|  |
|  |
|  |
|  |

|  |
| --- |
| **SECTION 4 – ACKNOWLEDGEMENT OF FUNDING** |
| I**f your application is successful, please outline all methods you would use to acknowledge the support you have received from the City. Please also outline how will you collaborate with the City for joint promotion and marketing material?** |
|  |
|  |
|  |
|  |

|  |
| --- |
| **SECTION 5 – BUDGET DETAILS** |
| **List all the expenditure and income details relating specifically to your activity/project including any supporting quotes and support of other funding partners. If this information exists in another format please attach a comprehensive budget document.****Please note: The City of Karratha does not provide grant funding for business operating costs (e.g. staff wages, rent, utilities and consumables)** |
| **Expenditure** | **Income** |
| **Items** |  **Total** | **Items** |  **Total** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
| **Total Expenditure** |  | **Total Income** |  |
| **Total amount requested from Council for this initiative (keep in mind relevant categories and funding caps in the Guidelines and Council’s support of up to 50%): $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

|  |
| --- |
| **SECTION 6 – OTHER INFORMATION** |
| **We welcome further information or attachments that may assist us in the processing of your application.** |
|  |
|  |
|  |
|  |

**SECTION 7 – DECLARATION**

I hereby certify that I am the authorised person of:

Business Name: And that:

* I have read and understood the Policy & Guidelines;
* The business has all the required insurances, permits and licences to operate;
* We would be able to proceed with the project if we were not successful in the funding application

The information contained herein, is to the best of my knowledge, true and correct.

**Applicant Name: Signature: Date:** / / 20

**SECTION 8 – FINAL CHECKLIST**

**Before submitting the application** please ensure that the following has been completed. Please note that this checklist is included that you provide all the required information for assessment of your application.

Please tick of each step once complete:

* Provided your ABN and if you are registered for GST clearly defined the purpose of the grant: 
* Clearly defined the purpose of the grant 
* Shown other fundraising sources 
* Included quotes for any requested expenditure items 
* Provided other documents that support the application 
* Had the application signed off by the authorised person of the business 

**Applications can be submitted to:**

City Growth Team

City of Karratha

PO Box 219

KARRATHA WA 6714 OR

Hand delivered to

City Growth Team

City of Karratha Administration Office

Welcome Road Karratha WA 6714

OR

Via email enquiries@karratha.wa.gov.au