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APPLICATION FOR DIRECT FINANCIAL ASSISTANCE

PLEASE NOTE THIS APPLICATION WILL NOT BE APPROVED UNLESS A SIGNED ORIGINAL IS RECEIVED.

ALL FUNDED PROJECTS **MUST** BE COMPLETED WITHIN 12 MONTHS OF THE APPROVAL. FAILURE WILL REQUIRE A NEW APPLICATION FOR DIRECT FINANCIAL ASSISTANCE THAT WILL BE REASSESSED ON ITS MERITS AND APPROVAL IS SUBJECT TO AVAILABLE FUNDING.

1. Applicant

(1) Name and address of Community Organisation:

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(2) Australian Business Number (ABN):

(3) Are you GST registered?: YES / NO

(4) Contact person for inquires:

Name:

Address:

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Telephone – (B/H): (A/H):

2. Description of project

(Please give adequate description of project in 50 words or less). (Continued over page).

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3. Timing - expected commencement and completion dates:

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(Important - applications should be lodged with, and considered by, the Trust before event occurs unless special circumstances necessitate immediate commitment by your community and the Trust's Manager has been contacted and agrees that your proposal is eligible for subsidy assistance. Funding will not be provided retrospectively)

4. Ownership of land on which facility is to be situated (if applicable)

Registered owner:

Certificate of title, registered lease or occupancy license number or details of any dedication: *(The Trust is unable to consider funding assistance for permanent structures on land not controlled by the applicant).*

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5. If a building, has Development Assessment Commission approval been sought?

YES / NO

6. Person or organisation responsible for the implementation of this project, ie your organisation or outside contractor(s): *(If outside contractors, details of their ABN and relevant insurance provisions must be sighted).*

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TRUST USE ONLY

Policy:
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Recommended amount of direct funding assistance: \$.....

Reference number:

Form 4

8. Authorisation

I hereby certify that I have been authorised by minuted resolution of the community organisation named herein to prepare and submit this application to the Trust.

- (1) Details of resolution (from minutes):
(You must attach a photocopy of the Associations Minute resolution)

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(2) Name:

(3) Position held:

(4) Signature:

(5) Date:

- (6) Declaration of support by principal community organisation recognised by the Trust where the organisation making the application herein is not the principal organisation recognised: *(refer to Community Advice Kit for a list of community organisations recognised by the Trust).*

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9. Checklist

Please ensure that you have completed the following:

- Adequate description of project/event so that the Trust can understand what the project is seeking to achieve.
- All project/event costs have been entered correctly and checked.
- All relevant supporting documentation attached, ie quotes, letters of support, relevant approvals (if applicable), etc.
- Details of resolution included.
- Application **signed** by authorised person.