Council fee remission grant application
Form Preview

Before Completing an Application

IMPORTANT: Please read information below to assist you in completing your application online.

BEFORE YOU BEGIN

Welcome to the George Town Council's online grant application service, powered by SmartyGrants.

You may begin anywhere in this application form. Please ensure you save as you go.

Incomplete applications and/or applications received after the closing date will not be considered.

Before completing this application form, check that both your organisation and your project is eligible under the George Town Council Community Assistance Program Guidelines. The Guidelines provide essential information that will assist you in preparing an application.

Information for Applicants

WHO CAN APPLY

Fee remission for hire of Council owned venues and Council service charges of up to $500 may be provided to community groups whose members are primarily residents of the George Town municipality, or are located in the George Town municipality, and which offer benefits to the community of George Town.

WHO CANNOT APPLY

- Individuals who have received financial support through the Community Assistance Grants in the same financial year.
- Activities in the same financial year Individuals who have already participated in the event for which they are requesting support (grants will not be made retrospectively)

If you have any questions in regards to these eligibility criteria, please contact Council on 63828800 or email - council@georgetown.tas.gov.au

Applications are available all year and are assessed on a case by case basis. ***Please ensure you apply at least 6 weeks prior to your planned event.***

Please call (03) 6382 8800 if you have any questions or require any assistance with the application process.

1. Assessment Criteria

* indicates a required field

Criteria Confirmation by Applicant

I confirm that the applicant ...

- Has read and understands the Grant Guidelines.
- Does not owe any reports or money to George Town Council as a result of previous funding or grants.
- Is located within and/or work within the George Town municipal area.

Please select to confirm your grant meets the above conditions *

○ I confirm the above conditions

Applicant Organisations are required to maintain Public Liability Insurance Cover ($20 million minimum).

Please upload your certificate of currency *

Attach a file:

2. Privacy Notice

* indicates a required field

We pledge to respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012. Our Privacy Statement can be viewed on Council's website*

2.1 Applicant Details

Organisation name *

Organisation Name

Please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ACNC or ATO.

OrganisationPostal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Organisation Street Address

Contact details *

Title First Name Last Name

This is the person we will correspond with about this grant

Contact Phone Number *

Contact Email *

2.2 Legal Status of

Please Select the legal status of your organisation:

*

- ☐ Incorporated Association
- ☐ Unincorporated Group
- ☐ Statutory body
- ☐ Limited Company

At least 1 choice and no more than 1 choice may be selected.

Does your organisation have an ABN?

*

- ☐ Yes
- ☐ No

No more than 1 choice may be selected.

ABN

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	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

If your organisation does not have an ABN you will need to attach an Statement By Supplier form. Please download from the ATO Website.

Attach a file:

Is your organisation registered for GST?

*
☐ Yes
☐ No
At least 1 choice and no more than 1 choice may be selected.

3. Event Details

* indicates a required field

Name of Project *

Location *

Details of Project *

If you wish to apply for assistance with Council Services, please select service (or services) from the fields below. *
☐ Hire of Venue
☐ Council Permit Fees
☐ Road Closures
☐ Waste Management
☐ Other:
At least 1 choice must be selected.

Please outline the number of Council services you are applying for Remission of Fee for?

*
☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5 ☐ 6 ☐ 7 ☐ 8 ☐ 9 ☐ 10
Other

No more than 1 choice may be selected.

Please indicate key dates associated with your application.

	Please provide any additional information.
Must be a date.	

4. Project Details

* indicates a required field

Acknowledgement of Council's Assistance

Describe how you will acknowledge the assistance of the George Town Council *

☐ Letter of thanks to George Town Council
☐ Invitation to the Mayor to attend the launch of the project (if applicable)
☐ Invitation to Council to attend the launch of the project (if applicable).
☐ Provision of photos to Council post the project.
☐ Acknowledgement in any media
☐ Other:

At least 1 choice must be selected.

5. Budget

* indicates a required field

Total Amount Requested *

$

Up to $500 - What is the total financial support you are requesting in this application?

6. Applicant Declaration

* indicates a required field

Certification

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant is

approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree * ○ Yes ○ No

Name of applicant (or person authorised to sign on behlalf of applicant) *

Title | First Name | Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Contact phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Contact Email *

Must be an email address.

Date *

Must be a date

7. Applicant Feedback

* indicates a required field

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback. (If you would rather provide anonymous feedback, please email meaganb@georgetown.tas.gov.au

Please indicate how you found the online application process:

○ Very easy ○ Easy ○ Neutral ○ Difficult ○ Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.