

Friendly Neighbourhood Grant (Application Form 20/21)

Form Preview

Eligibility

* indicates a required field

Applicants - Please note:

Before completing this application form, you should have read the Town of Port Hedland - **Community Grants Program** and specifically the **Friendly Neighbourhood Grant**. Please find Community Grants program Information booklet click here --> [APPLICANT MUST READ - Town of Port Hedland Community Information Booklet](#)

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

The below section "**Confirmation of Eligibility**" of the application form is designed to help you, and us, understand if you are eligible for this grant. It's crucial that you complete these questions before any others to ensure you do not waste your time applying if you're proposed project initiative or idea unsuitable for this grant.

If the event is hosted at a park or reserve, it will be covered by the Town's public liability insurance. If it is held on private property or a street/verge, it will not be covered.

The Town's Community Engagement Team is ready to answer any questions you may have in relation to your application.

If you have any questions in regards to these eligibility criteria, please contact grants@porthedland.wa.gov.au.

Confirmation of Eligibility

I confirm that the applicant ...

- has read and understands this grant's program [guidelines](#)
- is able to demonstrate alignment between their event and the aims of this program
- does not owe any reports or money to the Town of Port Hedland
- has not exceeded the maximum value of this grant in the current financial year.
- is a resident living in the Town of Port Hedland local government area - if you are unsure, visit this [link](#)
- is an individual or community group

Please select below: *

☐ Yes

☐ No

You must confirm that all statements above are true and correct.

Contact Details

* indicates a required field

Privacy Notice

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Form Preview

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*. To view our privacy statement, go to the [Town of Port Hedland Privacy Statement](#).

Community Group Application

Are you applying on behalf of a Community Group/Not-For-Profit Organisation? *

☐ Yes ☐ No

If yes, what is the name of the Community Group?

Application Contact Details

Applicant *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Applicant Address *

Address

<input type="text"/>
<input type="text"/>

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

Applicant Phone Number *

Must be an Australian phone number.

Applicant Email *

Must be an email address.

Previous support

Has the applicant had previous financial support from the Town of Port Hedland? *

☐ Yes ☐ No ☐ I don't know

If yes, please detail:

Include the year, activity and amount received.

Event Details

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Form Preview

* indicates a required field

Event Name: *

Provide a name for your event / initiative. Your title should be short but descriptive

Event Date: *

Must be a date.

Please submit application at least 1 week before event. (Please note if you require the funds prior to the event, you must apply 6 weeks before your event)

Event Location: *

Event must be held on public spaces such as parks, streets, verges and/or beaches.

How many people is this event for? *

☐ 20-30 people

☐ 40-60 people

☐ 60+ people

The number of people impacts the amount of funding you are eligible for:

- Event for 20-30 people \$100
- Event for 40-60 people \$200
- Event for 60+ people \$250

Please provide a short summary of your event *

Word count:

Must be between 30 and 150 words.

Be descriptive, but succinct. Include a brief summary of who this event is for, what you will do, and what effects you expect to result from your activities.

What Friendly Neighbourhood Grant objectives will be met? *

- ☐ Connecting local community and helping to build new networks
- ☐ Welcoming newcomers and/or encouraging community participation
- ☐ Increase neighbours trust to activate their neighbourhood public spaces
- ☐ Increase neighbourhood safety, cohesion and liveability

Budget

* indicates a required field

Total Amount Requested *

What is the total financial support you are requesting in this application?

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Form Preview

Maximum value of grant

- Event for 20-30 people \$100
- Event for 40-60 people \$200
- Event for 60+ people \$250

Budget

Please outline your project budget in the expenditure tables below. All amounts should be GST exclusive.

This grant will cover the following costs:

- Catering
- BBQ Hire
- Coffee van for street event

This grant will NOT cover the following costs:

- Events held at the rear of properties(backyards)
- Purchase, supply or licensing of alcohol
- Fundraising events

How to complete this section:

Please outline all the costs for your event, activity or project. Examples of expenses could include 'equipment and materials', 'travel costs', 'freight costs'.

Use the 'Notes' column for any additional information you think we should be aware of.

Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

For expense items over \$500, one written estimate, advertised price or written quote will need to be provided in the file upload area below the tables.

Two written quotes are required for items over \$5,000.

Expenditure Description	Expenditure Amount (\$)	Notes
	\$	

Budget Totals

Total Expenditure Amount

\$

Friendly Neighbourhood Grant (Application Form 20/21)

Form Preview

This number/amount is calculated.

Bank Details

* indicates a required field

Bank Details for Payment

Applicant Primary Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Certification and Feedback

* indicates a required field

Certification

This section must be completed by the applicant. The applicant must ensure the Community Grants Program Guidelines have been read.

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: *

Title

First Name

Last Name

Contact Phone Number:

*

Must be an Australian phone number.

Contact Email: *

Must be an email address.

Date *

Must be a date

Applicant Feedback

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Form Preview

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.

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 minutes

Any suggestions of ways this process can be easier?