

# Local Community Fund Application Form

## Form Preview

### 1. About the grant

\* indicates a required field

#### Instructions for Applicants

Before completing this application form, you should have read the [Local Community Fund Grant Guidelines](#) and have them handy for reference.

#### **Please note the important information below regarding your application:**

- Your application is not officially submitted for consideration until you click 'Review and Submit' at the end of the form. Once submitted, your form cannot be varied.
- Allow enough time to complete your application, consider the time to upload files. Applications close at 4PM AEST on 8 October 2024.
- Ensure you save your application regularly to avoid losing any information. This can be done at the top or bottom of each page.
- If you are unsure or unclear about any part of the application form, **please contact us prior to submitting** on 1300 679 673 from 8.30am to 4.30pm or email [energyco@regional.nsw.gov.au](mailto:energyco@regional.nsw.gov.au) and quote your Application Number.

To help you prepare your application, additional information and resources are available on the [EnergyCo webpage](#), including relevant application templates and frequently asked questions ([FAQs](#)). An information webinar and grant writing workshop will be held during the application open period, refer to the [EnergyCo webpage](#) for details.

#### **Application Number**

This field is read only.

#### **Program Details**

The NSW Government has committed \$15 million in funding to the Local Community Fund (the LCF) to support community organisations to provide programs, services or infrastructure that are designed to reflect local needs and deliver enduring benefit for local communities within the Central-West Orana Renewable Energy Zone (REZ).

This opportunity is an open, competitive grant round. Applications must be submitted by a specified date and eligible applications are then assessed on their comparative merits against nominated criteria.

The LCF Objectives are:

- to improve community amenity to meet identified social, cultural, environmental or recreational needs of the community;
- to increase community connection through improved access to programs or services including health, sport and recreation, art and cultural or tourism; and
- to boost resilience and innovation through community renewable energy and environmental improvement programs.

#### **Grant Program Name**

# Local Community Fund Application Form

## Form Preview

This field is read only.  
The program this submission is in.

### Program Key Dates

Please refer to the [EnergyCo webpage](#) for up-to-date information.

#### **Applications open**

9:00am, Monday 15 July 2024

#### **Applications close**

4:00pm, Tuesday 8 October 2024

#### **Application outcome date**

From 23 December 2024

### Program Evaluation

Successful Applicants will be required to participate in a program evaluation to determine the extent to which their projects have contributed to the objectives of the Community and Employment Benefits Program. The evaluation will require Applicants to provide evidence of how projects have resulted in measurable outcomes and benefits that are consistent with the objectives of the program. Guidance on data collection will be provided for successful Applicants.

### Eligibility Confirmation

#### **Declare this application meets the Program eligibility criteria:**

- The application is being submitted by an eligible applicant;
- Projects must deliver community benefits to the local community in the geographic area that forms the Central-West Orana REZ;
- Projects can commence within 3 months of execution of the Funding Agreement and be completed by 31 December 2028;
- Projects can be operated and maintained beyond the funding period (if applicable); and
- Applicants will notify the NSW Government if grant funding is secured from another source, as soon as practicable.

**I confirm that the applicant and project is eligible according to the criteria outlined in the LCF Grant Guidelines \***

Yes

## 2. Contact Details

\* indicates a required field

### Eligible Applicants

Eligible Applicants include:

# Local Community Fund Application Form

## Form Preview

- Incorporated not-for-profit community organisations;
- Local Aboriginal Land Councils;
- Incorporated Aboriginal community organisations (i.e. initiated by, controlled and operated by Aboriginal people and/or governed by a board or committee of Aboriginal people);
- Local councils (*in partnership with or in support of a community project*); and
- Committees under section 355 of the *Local Government Act 1993* (NSW) must apply via the relevant council.

Applicants must provide evidence that they are an incorporated entity by providing either an Australian Business Number (ABN) or an Australian Company Number (ACN). Eligible organisations that are unincorporated must provide evidence that they are registered with NSW Fair Trading under the *Associations Incorporation Act 2009* (NSW) or another Act.

Eligible Applicants must have or be able and willing to purchase at least \$20 million public liability insurance.

Only Organisations are eligible to apply for the LCF.

Select **Organisation** below and enter your eligible organisation's details below.

### Applicant Details

#### Applicant \*

Individual       Organisation

Organisation Name

Title      First Name      Last Name

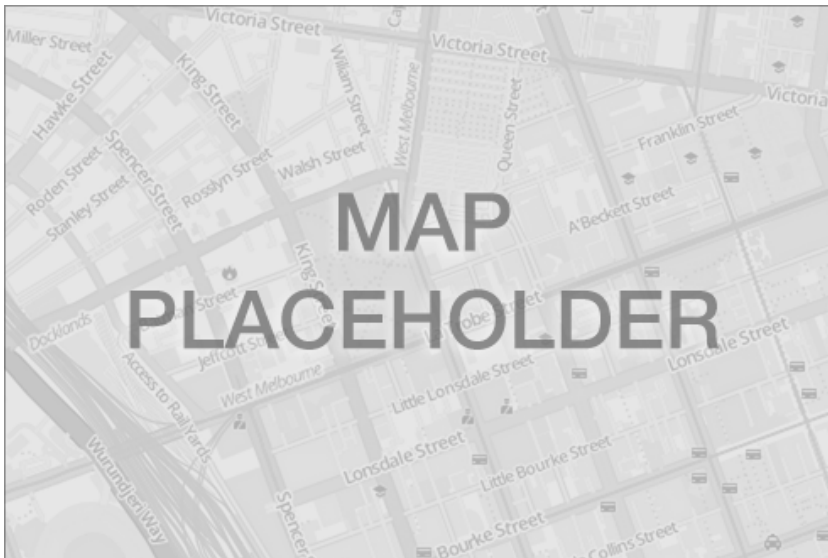
For organisations: please use the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

#### Applicant Primary Address

Address

# Local Community Fund Application Form

## Form Preview



### Applicant Postal Address

Address

### Applicant Primary Phone Number \*

Must be an Australian phone number.  
Country code not required, area code for landlines is required.

### Applicant Email Address \*

Must be an email address.

### Applicant Website

Must be a URL.

**You have selected 'Individual' as your Applicant type.**

**Individuals are ineligible under the LCF and will not be considered for funding.**

## Primary Contact Details

### Primary Contact \*

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

# Local Community Fund Application Form

## Form Preview

This is the person we will correspond with about this grant.

### Primary Contact Position \*

e.g., Manager, Board Member or Fundraising Coordinator.

### Primary Contact Phone Number \*

Must be an Australian phone number.

Country code not required, area code for landlines is required.

### Primary Contact Other Phone Number

Must be an Australian phone number.

Country code not required, area code for landlines is required.

### Primary Contact Email \*

This is the address we will use to correspond with you about this grant.

## Partnerships

Partnerships are eligible (with the exception of private companies or business), where the lead applicant is an Eligible Applicant and where clear public benefit can be demonstrated. If successful, the Eligible Applicant will be solely responsible for the delivery of the project and must adhere to the terms and conditions outlined in the Funding Agreement.

### Is this a joint application/partnership? \*

Yes  No

Applications under a partnership arrangement should be submitted by the lead organisation. The arrangement should be formalised at the time of application.

## 3. Organisation Details

\* indicates a required field

### Does the applicant organisation have an Australian Business Number (ABN)? \*

Yes  No

### Applicant Organisation 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

# Local Community Fund Application Form

## Form Preview

Entity name
ABN status
Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type <a href="#">More information</a>
ACNC Registration
Tax Concessions
Main business location

Must be an ABN.

**Is your organisation registered for GST? \***

- Yes  No

**Which type of eligible applicant are you? \***

- Not-for-profit Organisation  
 Local Aboriginal Land Council  
 Aboriginal Community Organisation  
 Local Council

**Is the applicant organisation initiated by, controlled and operated by Aboriginal people and/or governed by a board or committee of Aboriginal people? \***

- Yes  No

**Applicant Organisation Australian Company Number (ACN)**

Please provide if relevant.

### NSW Fair Trading

**Does your organisation have a NSW Fair Trading Incorporation Number? \***

- Yes  No

If unsure search Fair Trading Incorporated Associations Register <https://applications.fairtrading.nsw.gov.au/assocregister/default.aspx>

**NSW Fair Trading Incorporation Number**

### Indigenous Corporation Number

**Does your organisation have an Indigenous Corporation Number? \***

# Local Community Fund Application Form

## Form Preview

Yes

No

### Indigenous Corporation Number

**If your organisation is registered under an Act of Parliament, please provide the Act you are registered under**

### Public Liability Insurance

Eligible Applicants must have or be able and willing to purchase at least \$20 million public liability insurance.

**Does your organisation have at least \$20 million in public liability insurance? \***

Yes

No, but willing to obtain

Applicants are required to hold at least \$20 million public liability insurance or must be willing to obtain in order to enter into a funding deed with the NSW Government.

**Provide evidence that the applicant organisation holds Public Liability Insurance.**

\*

Attach a file:

Note that if Public Liability Insurance has expired before contracting commences, the organisation will be required to provide a current certificate.

**If successful, you will need to provide evidence of \$20 million public liability insurance prior to entering into a Funding Deed with the Department. Confirm you are able to achieve this. \***

Yes

No

### Partner Organisation Details

Detail each of the Partner Organisations involved in this application. 'Add more' as appropriate to ensure all partnership organisations are captured.

**Partner Organisation Name \***

Organisation Name

Enter the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

**Partner Organisation ABN \***

# Local Community Fund Application Form

## Form Preview

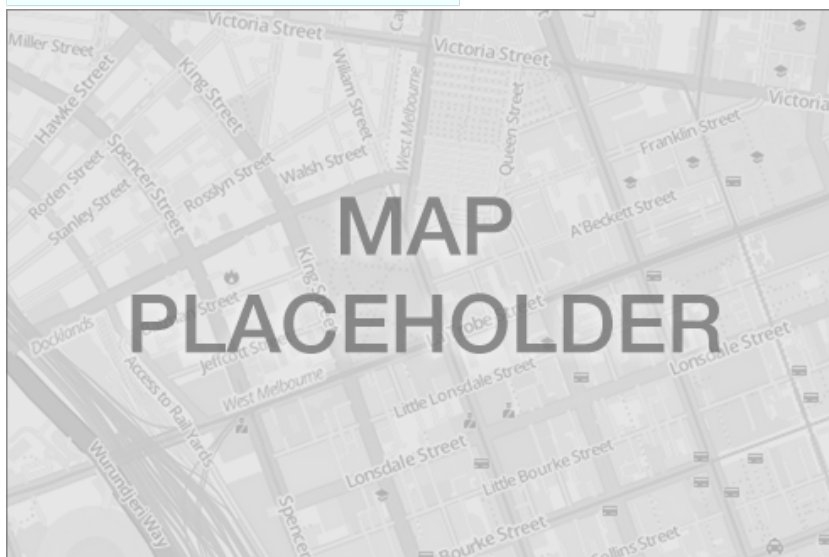
The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

### Partner Organisation Address \*

Address

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

## 4. Project Details

\* indicates a required field



# Local Community Fund Application Form

## Form Preview

### Project Details and Dates

#### Eligible Projects

In accordance with the NSW [Electricity Infrastructure Investment Act 2020](#) (EII Act), eligible projects must deliver community benefits to the local community in the geographic area that forms the renewable energy zone to which the access scheme applies (as defined [here](#)).

Eligible projects must be aligned with the objectives of the LCF. The LCF objectives have been designed to deliver the community purposes as defined by the [EII Regulation](#).

#### Dates Instruction

Date must be recorded as **DD/MM/YYYY** and should reflect the anticipated project start date.

Projects must not be retrospective, must commence within **3 months** of commencement of the funding deed and be completed by **December 2028**.

#### Project Title Instruction

Provide a name for your project. The title should be short but descriptive, noting the title will be published if successful. This will be used in correspondence and for publication requirements. Ensure it accurately describes the project activities you will be delivering.

#### Brief Description Instruction

This should be a short description for publication purposes. It should not give background information about your project, only about the activities you are applying for.

#### Primary Location Instruction

This should be the main project or site location where activities will be delivered for your project. Projects must be delivered within the Central-West Orana REZ geographic area (as defined [here](#)). Applicants are strongly encouraged to consider delivery of projects and activities into villages and smaller communities most impacted by REZ activities.

### Project Type

Eligible project types consist of a piece of infrastructure, program or service which provides benefit to the relevant local community as defined by the [Guidelines](#) and the Electricity Infrastructure Investment Regulation 2021.

#### Please select your project type:

#### Title \*

#### Word count:

Must be no more than 25 words.

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

# Local Community Fund Application Form

## Form Preview

### Brief description \*

#### Word count:

Must be no more than 50 words.

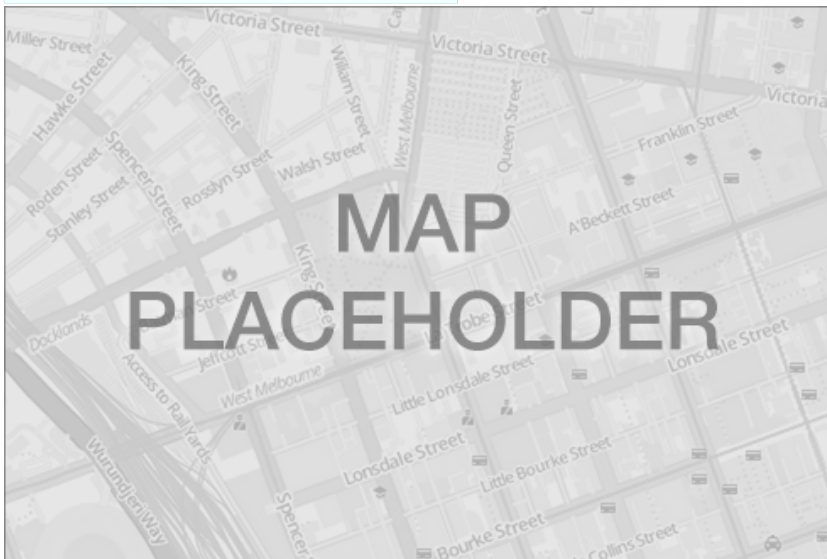
Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

### Anticipated start date \*

### Anticipated end date \*

### Primary location of your initiative

Address

Any, but at least one field is required.

Primary location does not need to be a specific address, and can be postcode, suburb, state, etc If delivered online, please specify the area of focus for delivery.

### Detailed project description \*

#### Word count:

Must be no more than 500 words.

This should outline the exact scope of works that will be delivered with the grant funding. It should include what you will do and how you will do it.

# Local Community Fund Application Form

## Form Preview

**Will your project be delivered across more than one location? \***

Yes

No

Additional project location details

**How many additional locations will the program be delivered across? \***

**Brief description of the activity at your Primary Location entered above. \***

Word count:

Must be no more than 25 words.

**Project Location 2 \***

Address

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

**Brief description of the activity at Location 2 \***

Word count:

Must be no more than 25 words.

**Project Location 3 \***

Address

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

**Brief description of the activity at Location 3 \***

Word count:

Must be no more than 25 words.

**Project Location 4 \***

Address

# Local Community Fund Application Form

## Form Preview

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

### Brief description of the activity at Location 4 \*

Word count:

Must be no more than 25 words.

### Project Location 5 \*

Address

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

### Brief description of the activity at Location 5 \*

Word count:

Must be no more than 25 words.

Additional locations (if they are greater than 4)

### Where will the additional activity occur? Brief description of the activity

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.	Must be no more than 25 words.
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

## 5. Merit Criteria 1 - Community Support (40% weighting)

\* indicates a required field

Consultation is an important part of the process to ensure that projects are supported by the community and have been identified as a community need. Applicants are required to provide evidence of consultation and support for the project.

To assist with reviewing uploads, please use the following naming convention: **LCF - Letter of Support - Council** OR **LCF - Community Strategic Plan**.

### Community Need

#### Please describe how the project has been identified as a community need? \*

Word count:

# Local Community Fund Application Form

## Form Preview

Must be no more than 200 words.

Community need should be evidenced through a community consultation process, council strategic plans, community precinct master plan or identified lack of similar services.

### Please attach evidence of community need (if relevant)

Attach a file:

## Community Support

Applicants must demonstrate **community support** for the project. Support can be evidenced by letters of support, online surveys or other documented community engagement processes.

In the table below please detail all stakeholders interested/supportive or impacted by the project. Stakeholders may be key community members, other organisations, other funders, etc.

You can keep this high level (e.g. quarterly meetings / regular email communication) rather than identifying each individual meeting or communication.

Organisation title	Upload letters or evidence of community support	Select the type of evidence of community support
Must be no more than 150 characters.		

## 6. Merit Criteria 2 - Alignment with Objectives (30% weighting)

\* indicates a required field

### Fund Objectives

Applicants must demonstrate how the project's anticipated community benefits will directly contribute to one or more of the program objectives.

#### Please select the objectives that your project aligns to (select all that apply): \*

- to improve community amenity to meet identified social, cultural, environmental or recreational needs of the community.
- to increase community connection through improved access to programs or services including health, sport and recreation, art and cultural or tourism.
- to boost resilience and innovation through community renewable energy and environmental improvement programs.

Please select one or more options

### Improve Community Amenity

# Local Community Fund Application Form

## Form Preview

**Please describe how the project will improve community amenity and meet an identified social, cultural, environmental or recreational need/s of the community.** \*

Word count:  
Must be no more than 200 words.

### Increase Community Connection

**Please describe how the project will increase community connection through improved access to health, sport and recreation, art and cultural or tourism programs or services.** \*

Word count:  
Must be no more than 200 words.

### Boost Resilience and Innovation

**Please describe how the project will boost resilience and innovation through community renewable energy and/or environmental improvement programs.** \*

Word count:  
Must be no more than 200 words.

### Community Wellbeing and Prosperity

**Please describe how the project will make a positive contribution to community wellbeing and prosperity, evidenced by measurable metrics (i.e. number of user groups) and available alternative facilities and services.** \*

Word count:  
Must be no more than 200 words.

### Long-term Community Benefits

**Please describe how the project will deliver long-term benefits to the community.** \*

Word count:  
Must be no more than 200 words.  
Long-term benefits refer to the positive outcomes or advantages that are gained or experienced after 3 or more years.

# Local Community Fund Application Form

## Form Preview

### Accessibility and Inclusion

Applicants should demonstrate consideration of accessibility and inclusion measures in their application. Projects should demonstrate the provision of fit-for-purpose, accessible and safe facilities, or increased participation opportunities by increasing accessibility and inclusion/universal design.

**Does your project support equitable participation or engagement of people with disability? \***

Yes - Fully accessible       Yes - Partially Accessible       No - Not accessible at all  
Equitable means all people across physical, sensory and cognitive disability can engage in all aspects of the project and benefit from its outcomes on an equal basis with others. Participation or engagement is assumed and embedded, not 'special' or an 'add on'.

**Please provide details of the physical, sensory and/or cognitive accessibility improvement(s) and/or inclusion(s) that your project has considered. \***

Word count:  
Must be no more than 200 words.

### 7. Merit Criteria 3 - Deliverability and Affordability (30% weighting)

\* indicates a required field

#### Project Management Plan

Please provide a Project Management Plan that outlines project delivery within program timeframe requirements, with consideration of Development Approval if required. A Project Management Plan template can be found [HERE](#).

**Upload a Project Management Plan \***

Attach a file:

It is strongly recommended that applicants use the template provided or align their information to the fields within the template. Project plans must have a suitable level of detail commensurate with the funding amount sought.

#### Development Approval

**Does your project require development approval? \***

Yes       No

We encourage you to apply for development approval from the relevant consent authority as soon as possible. If your application is successful, approvals can take several months depending on the project's complexity. This will prevent any unnecessary delays to the delivery of your project to your community.

# Local Community Fund Application Form

## Form Preview

### Have you secured the development approval? \*

- Yes  No

If your project has not secured development approval please ensure consideration of this in the Project Management Plan.

### Have you engaged the relevant consent authority (i.e. Council) to commence the development approval process? \*

- Yes  No

If you have not begun the development approval process please ensure consideration of this in the Project Management Plan.

### What stage of the development approval process are you up to (including an expected timeframe to obtain development approval)? \*

## Landowner's Consent

### Does the applicant organisation own the land on which the project will be delivered? \*

- Yes  No

### Who owns the land where your project will be delivered? \*

- Local council  
 NSW Government (Crown Lands)  
 Commonwealth Government  
 Community group  
 Private land  
 Other:

### Does this project require Landowner's Consent? \*

- Yes  No

Projects involving the upgrade or construction on land not owned by the applicant must seek Landowner's Consent prior to commencing any works. If you own the property where your project will be delivered you will be required to provide evidence of land ownership, such as with a current rate notice, an approved DA or title deed information. If you do not own the property where your project will be delivered, you will be required to provide evidence of landowner's consent. This should include:

- Address where the project is delivered
- Works being undertaken
- Arrangements that you have with the landowner.

### Provide evidence of landowner consent/s or evidence of ownership or support \*

Attach a file:



# Local Community Fund Application Form

## Form Preview

If available or applicable at this stage. Landowner consent template can be found [HERE](#).

### Key Project Personnel

Applicants are required to demonstrate access to the necessary capability and experience required for successful project delivery. Please detail the key personnel who will be responsible for the delivery of the project, including their qualifications and experience.

**Project experience should be proportional to the level of funding being sought.**

Include only one person per row. Add more rows if you want to list additional personnel.

Name	Organisation	Role	Qualifications or Experience
			Must be no more than 50 words.

### Option to upload CV or supporting documentation

Attach a file:

### Risks and Dependencies

A risk is an uncertain event or set of circumstances that, should it occur, will have an effect (either positive or negative) on achievement of one or more project objectives. Dependencies are the relationships between different tasks, features, components, or teams that affect the delivery and quality of the project.

Risk Management is a structured process that allows individual risk events and overall project risk to be understood and managed proactively, optimising project success by minimising threats and maximising opportunities.

**Please upload a risk assessment for your project or complete the risk table below.**

### Risk Assessment

Attach a file:

**Please detail any risks or uncertainties in the delivery of the project, and how each of these will be managed.**

*Include only one risk or dependency per row. Add more rows if you want to list additional risks or dependencies.*

Risk or dependency description	How will the risk or dependency be mitigated or managed
--------------------------------	---

# Local Community Fund Application Form

## Form Preview

Must be no more than 50 words.	Must be no more than 50 words.

### Budget - Registered for GST

- GST is not payable on grant payments to local councils under the Program because the payments are between government related entities.
- For eligible applicants registered for GST and where it is payable, NSW Government will pay the approved grant amount plus 10 per cent.

**Please ensure the total project cost and total amount requested below are EXCLUSIVE of GST.**

### Budget - Not registered for GST

- If eligible applicants are not registered for GST, they will need to incorporate any GST paid by them to third parties into the project budgets and the grant amount.

**Please ensure the total project cost and total amount requested below is INCLUSIVE of any GST payable to third parties.**

#### Total Project Cost \*

\$

What is the total budgeted cost (dollars) of your project?

#### Total Amount Requested \*

\$

What is the total financial support you are requesting under this grant?

#### Total Applicant Co-contribution \*

\$

Must be a dollar amount.

What is the total monetary amount the Applicant will be contributing to the project? Enter 0 if not co-contributing to this project. Only include financial/cash contributions in this section. Do not include in-kind contributions towards the project. GST exclusive where applicable.

#### Are there any other sources of income for the project? \*

Yes

No

#### Detail all other sources of income for the project? \*

e.g. if receiving funding from another program list here and amounts.

# Local Community Fund Application Form

## Form Preview

### Total amount of funding from other secured income sources \*

\$

Must be a dollar amount.

What is the total financial support you are requesting/requested from other sources?

### Difference between Total Project Cost entered and Total Project Cost calculated

\$

This number/amount is automatically calculated and should equal \$0. Where this figure does not equal \$0, please review the figures entered previously (at the top of this page).

## Expenditure

Please include below all budgeted items (including the amount requested and any GST attracted) that you are seeking to fund under the grant.

Eligible project costs may include those associated with:

- Constructing new or upgrading existing local community amenity or community services infrastructure; and/or
- Delivery of community programs or services.

Applicants may include up to 25 per cent of the total project cost for contingency and up to 10 per cent of the total project cost for project management and administration.

Please ensure budgeted items are based on quotes or detailed estimates that represent value for money.

### Notes about GST and Grant Requests:

- GST is not payable on grant payments to local councils under the Program because the payments are between government related entities.
- For eligible applicants registered for GST and where it is payable, NSW Government will pay the approved grant amount plus 10 per cent. If eligible applicants are not registered for GST, they will need to incorporate any GST paid by them to third parties into the project budgets and the grant amount.

Expenditure description	Expenditure type	Expenditure amount (ex. GST)	Expenditure GST	Expenditure amount (inc. GST*)	Notes
-------------------------	------------------	------------------------------	-----------------	--------------------------------	-------

		\$	\$	\$	
				\$	
Provide your expected, total project expenses split by expense category.		Must be a dollar amount.	Must be a dollar amount.	*GST Inc. where relevant This number/ amount is calculated.	

Expenditure Total (Inc GST)\*

**Total Expenditure Amount**

# Local Community Fund Application Form

## Form Preview

\$

This number/amount is calculated.

\*Inc GST where relevant. Total Expenditure Amount should match Total Project Cost.

### Expenditure Total (Ex GST)

#### Total Expenditure Amount

This number/amount is calculated.

Total Expenditure Amount should match Total Project Cost.

#### Attach quotes for those expenditure (cost) items as identified in the above table.

\*

Attach a file:

Please provide quotes or detailed estimates to support items in the expenditure table.

### Maintenance

#### Does your project require ongoing operations and/or maintenance? \*

Yes

No

#### Please outline the ongoing operation and/or maintenance plan for when the project is completed \*

Word count:

Must be no more than 200 words.

Please outline who will be responsible for the ongoing maintenance and operation of the project and how it will be financed.

## 8. Declaration and Authorisation

\* indicates a required field

### Declaration

#### I declare this application meets the program's eligibility criteria: \*

- Application has been prepared by and is being submitted by an eligible applicant
- Projects are located in the Central-West Orana REZ geographic area
- Projects can commence within 3 months of the commencement date of a funding deed and be completed by December 2028

# Local Community Fund Application Form

## Form Preview

- Projects can be operated and maintained beyond the funding period (if applicable)
- Applicants will notify the Department if grant funding is secured from another source

At least 5 choices must be selected.

## Eligibility Declaration

The Applicant represents and warrants that this application has been submitted by an authorised representative of the Applicant (e.g. CEO, Chief Financial Officer, General Manager, Director, Chair of the Board, President, authorised manager etc).

Where this Application is submitted in the course of employment by a representative of any kind (e.g. authorised representative or agent) of the Applicant, you: (i) acknowledge and agree that the Applicant is deemed to be jointly and separately bound by this application; and (ii) represent and warrant that you have the authority to represent and bind the Applicant as contemplated by this provision.

By submitting this application form I hereby declare that:

- I agree for my project to be automatically considered in other NSW funding programs;
- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge;
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application;
- I am authorised to submit this application on behalf of, and have the authority to represent and bind the Applicant; and
- I understand that any false declaration may render this application ineligible/invalid.
- If successful for funding, I understand I will be required to participate in program evaluation activities.

**Yes, I confirm and declare this application meets the criteria outlined above \***

Yes

## Disclaimer

*The Applicant acknowledges and agrees that: (i) submission of this application does not guarantee funding will be granted for any project, and the NSW Government expressly reserves the right to accept or reject this application at its discretion; (ii) they must bear the costs of preparing and submitting this application and the NSW Government does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and (iii) they have read the Program Grant Guidelines and has fully informed itself of the relevant program requirements.*

## Use of Information

# Local Community Fund Application Form

## Form Preview

*By submitting this application form, the Applicant acknowledges and agrees that: (i) if this project application is successful, the relevant details of the project will be made public subject to the Privacy and Personal Information Protection Act 1998 (NSW), including details such as the names of the organisation (Applicant) and any partnering organisation (state government agency or non-government organisation), project title, project description, location, anticipated time for completion and amount awarded; (ii) the NSW Government will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-in-confidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the Government Information (Public Access) Act 2009 (NSW) (GIPA Act); and (iii) in some circumstances the NSW Government may release information contained in this application form and other relevant information in relation to this application in response to a request lodged under the GIPA Act or otherwise as required or permitted by law.*

## Privacy Notice

*By submitting this Application form, the Applicant acknowledges and agrees that: (i) the NSW Government is required to comply with the Privacy and Personal Information Protection Act 1998 (NSW) (the Privacy Act) and that any personal information (as defined by the Privacy Act) collected by the NSW Government in relation to the program will be handled in accordance with the Privacy Act and its privacy policy (available at: [www.dpc.nsw.gov.au/privacy](http://www.dpc.nsw.gov.au/privacy)); (ii) the information it provides to the NSW Government in connection with this application will be collected and stored on a database and will only be used for the purposes for which it was collected (including, where necessary, being disclosed to other Government agencies in connection with the assessment of the merits of an application) or as otherwise permitted by the Privacy Act; and (iii) they have taken steps to ensure that any person whose personal information (as defined by the Privacy Act) is included in this application has consented to the fact that the NSW Government and its agencies may be supplied with that personal information, and has been made aware of the purposes for which it has been collected and may be used.*

## Authorisation

**I agree \***

Yes

**Name of authorised person \***

Title      First Name      Last Name

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

**Position \***

Position held in applicant organisation (e.g. CEO, Treasurer)

**Phone number \***

Must be an Australian phone number.

# Local Community Fund Application Form

## Form Preview

We may contact you to verify that this application is authorised by the applicant organisation

**Email \***

Must be an email address.