Request for Hire Fee Waiver Application Form

This round is for request for Hire Fee Waivers ONLY. If your sponsorship request is a combined 'Financial Assistance' and 'Fee Waiver', please apply through the current Event Assistance Grant round.

Requests for Hire Fee Waivers will be assessed in accordance of the <u>Community Support</u> Program Guidelines.

If you have any questions in regards to the grant program, please contact **Central Highlands Regional Council on 1300 242 686.**

Eligibility Check

* indicates a required field

This section of the application form is designed to help you, and council, understand if you are eligible to apply for the a Hire Fee Waiver.

To ensure your organisation and application complies with guidelines, please
indicate if any of the below statements apply to your organisation.
☐ A charitable organisation registered with Australian Charities and Not for Profits
Commission (ACNC)
☐ A registered Not for Profit with either Office of Fair Trading (Queensland) or Australian
Securities & Investment Commission (Australia)
☐ Has an active Australian Business Number (ABN)
□ Is Incorporated
☐ Is a Not for Profit community organisation / group based in the Central Highlands Region
☐ Is a Not for Profit community organisation / group servicing the Central Highlands Region
☐ Is an educational institution
☐ Has a signed Tenure Agreement if one has been offered in excess of six months from the
application date (only applicable for organisations operating from council land/buildings)
Eligible Applicants
☐ Is a political organisation or political party
☐ Is a Local, State or Federal Government agency
☐ Is a commercial business or organisation
☐ Has an outstanding debt to council or any outstanding matters/concerns with council
☐ Has failed to adequately acquit, manage or deliver outcomes from previous council
funding
☐ Has already received funding under the same funding stream in the financial year that
the application is lodged
☐ Has access to funds generated internally from permanently licensed premises or onsite
gambling machines
Ineligible Applicants

Have you selected any ineligible criteria in the above selection? * ○ Yes ○ No
INELIGIBLE TO APPLY
You have selected one (1) or more than one (1) criteria that indicates you are ineligible to apply for a Hire Fee Waiver.
For more information regarding <i>Eligibility Criteria</i> please refer to the guidelines .
Applicant Details
* indicates a required field
Organisation Name * Organisation Name
Contact Person *
E.g., president, secretary, treasurer.
Address for Notices * Address
Address Line 1, Suburb/Town, State/Province, and Postcode are required.
Phone Number *
Must be an Australian phone number.
Email *
Must be an email address.
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 (G	SST)	
DGR Endorsed		
ATO Charity Type	More information	
ACNC Registration		
Tax Concessions		
Main business location		
Must be an ABN.		
Incorporation / ACN	Number (if applicable)	
-		
Certificate of Incorp Attach a file:	oration (if applicable)	
Please upload a copy of y	your organisation's Certificate of Inco	rporation here.
Event / Program	Details	
* indicates a required f	field	
Event Details		
Event Description		
Event Title *		
Event Start Date *		
Event End Date *		
Event End Date		
Is this a 'one off', 'ar	nnual' or 'Event Program'? * O Annual event	Event Program
○ New	ting event in the Central High	lands Region? *
Existing		
Provide a description	n of the event *	

Word count: Provide a short description (100 words recomme	nded) of your event.
Council Venue *	
Confirmation of Booking * Attach a file:	
Attach a file:	

Fees and Chargers Waiver

* indicates a required field

Before completing this section please ensure you have a completed an online facility booking here and obtained an invoice for the fees and charges relative to this application.

UNDER NO CIRCUMSTANCES WILL BONDS BE CONSIDERED TO BE WAIVED. Bonds serve as a security against damages and are required to be paid prior to the use of a facility or open space.

IMPORTANT: Requests for Fees and Charges Waiver can only be to the maximum value of \$3,000.

Booking ID #	\$	Invoice
	(excluding bond amount)	Hint: Download your invoice
		from the 'My Account' section in
		Bookable.
	\$	

Total Fees and Charges Waiver Request *

\$

This number/amount is calculated.

Financial Sustainability

* indicates a required field

This section of the application form is designed to assist the panel on assessing the financial sustainability of the proposed event / program and how reliant the event / program is on council funding.

Have attempts been made to raise funds	from other sources	? *
○ Yes	○ No	
Are there any other partners that have of delivery of this event? *	ommitted to suppor	ting you in the
○ Yes	○ No	
Please provide details of requested supp	ort. *	
Please provide details of committed supprovided. *	porters and the leve	el of support to be
If your application for hire fee waiver is		ceed with the event /
program or will the event / program be o		nding alternative entions
Yes, the organisation will proceed with theNo, the event / program will be cancelled	event / program by n	naing alternative options
, , , , , , , , , , , , , , , , , , ,		
Has the event / project received any prev		
kind) from Central Highlands Regional Co	ouncii in the past 3 y	years? *
	0 110	
Please provide details of the type of assikind), amount and year of funding. *	stance (monetary, f	ee waiver and/or in-
Provide specific details of the funding received by	the organisation over the	last 3 years. Name of the
fund, value of funding received, project or event th		yearsae or are

Financial Documentation

As per the <u>guidelines</u>, applicants must provide one of the following to be eligible for a hire fee waiver:

- Two immediately previous audited financial statements, or
- A business case for the event or program must be provided to assess the application, or
- Detailed budget for the program, project and/or activity, or
- An explanation of why financial statements or a business case cannot be provided.

Audited Financial Statements

Attach a file:

Must provide 2x immediately previous years audited	financial statements; or
Business Case Attach a file:	
Must provide a business case for the event or project	t to assess the applications; or
Detailed Event Budget Attach a file:	
Must provide a detailed budget for the event or proje	ect; or
Have you provided 2x Audited Financials, Budget? *	a Business Case or a Detailed Event
	O No
Provide a detailed explanation of why fina budget cannot be provided. *	nncial statements, business case or
Event / Program Benefits	
* indicates a required field	
This section of the application form is designed and economical benefit of the proposed event /	•
Is there a community need / interest for the support this? *	his event and what is the evidence to
Hint: Why does this event need to happen? Is there i does the town/region need this event to happen?	nterest from the community for this event? Why
How will the event source local businesses	s and support local community groups? *
Hint: How will your organisation encourage the use or groups?	of supporting local businesses and community
Will the event generate an increase in visi	itor numbers to the region? *
Hint: Is the event attractive to tourists? Would you tr to this one?	9 110

Will the event trigger positive community	-
O Yes Hint: Would this event be a 'good news story' on s	O No ocial media and in journalism?
Attachments	
* indicates a required field	
IMPORTANT: Once your application has bee online application form. Please ensure all det information has been attached.	
Request Letter * Attach a file:	
Please upload a letter from your organisation that and provide evidence of how the event / project al	outlines the reason for your sponsorship request igns with the grant aims outlined in the guidelines.
Event Documentation	
Certificate of Currency (Public Liability) Attach a file:	
Event Plan Attach a file:	
Risk Management Plan Attach a file:	
Other Supporting Documentation	
Please upload other documents that support	your application.
File Upload Attach a file:	
E.g., Event promotional materials, previous event	feedback, social media posts etc.

Application Lodgement

* indicates a required field

Acknowledgement

It is a condition of approval that council be acknowledged for its contribution to the organisation / event / project. Please detail how the organisation will be appropriately acknowledged for its support. *)
Privacy Collection Statement	
Central Highlands Regional Council is collecting this information in order to comply with its responsibilities and obligations as a local government. The information will only be used by Council Officers or Agencies which may have a legitimate need for the information process applications or the like. This information will not be disclosed to a third party unless you have given your written consent, or we are required to do so by law. For more information about privacy in Central Highlands Regional Council see our privacy information our website.	e
Do you give permission for your email address to be added to the Event Assistance Program mailing list for future updates? * ○ Yes ○ No	
Declaration	
I/We, the applicant:-	
 Declare that the above information is true and correct in all respects (to the best of my knowledge) at the time of lodgement of this application with the Central Highland Regional Council; Submit the application with the full knowledge and agreement of the management of the organisation; Have read the associated Policy and Guidelines Agree that I/we will make contact with Central Highlands Regional Council immediate if any of the details given in relation to this application change or are incorrect; and Provide consent for council to; Advertise projects that have been successfully funded council (i.e. media release, social media); and; Advertise successful recipient details council's website (including but not limited to, project description, name and recipient amount funded). 	ds of tely d by on
* O I/We agree with the above declaration.	
Submitting Officer's Name *	
First Name Last Name	
Submitting Officer's Position *	
E.g., president, secretary, treasurer.	