**APPLICATION FORM**

**COVID-19 Responsiveness Funding**

**CLOSING DATE AND TIME: 4.30PM, FRIDAY, 18 FEBRUARY 2022**

Organisation/Business Name: **Type your answer here.**

Address: Type your answer here.

Contact Person: **Type your answer here.**

Email: Type your answer here.

Phone: Type your answer here.

ABN (if applicable): Type your answer here.

Are you registered for GST? YES [ ]  NO [ ]

Amount requested: **$Dollar Amount**

Please submit a simple budget with this application, justifying the amount requested.

Please also submit a copy of your organisation’s most recent financial statements.

**Eligibility**

|  |  |
| --- | --- |
| Are you an organisation / community group / business operating within the Coonamble Local Government Area? | YES [ ]  NO [ ]   |
| Are you community-based and not-for-profit? *(this is not an essential criterion, but may be used to prioritise funding allocations)* | YES [ ]  NO [ ]  |

**Project / Activity**

Outline and describe what you are proposing to do with the requested donation. For example:

* Upgrade a food business’s kitchen to ensure stronger compliance with new standards and regulations.
* Deep-clean food or accommodation businesses to better comply with new food-preparation and health compliance standards.
* Implement minor initiatives to improve hygiene practices within a business.
* Recovery activities or associated costs for a business, organisation or community group which has been negatively impacted by of the pandemic since 1 July 2021.

Describe your planned project or activity here.

**Impact**

How will the project / activity contribute to building resilience or helping the way you respond effectively to COVID-19?

Type your answer here.

How many people would benefit from your project / activity?

Type your answer here; please specify whether this is a daily, weekly or monthly estimate.

How will the project / activity contribute to building resilience or helping the way you respond effectively to COVID-19?

Type your answer here.

If you do not receive the full amount requested:

|  |  |
| --- | --- |
| Will you still be able to complete your proposed project / activity before 30 June 2022? | YES [ ]  NO [ ]   |

 If not, how will you accomplish part of your plan with lesser funding?

Type your answer here.

**Checklist**

|  |  |
| --- | --- |
| I have answered all questions | YES [ ]  NO [ ]   |
| I have a simple budget to submit with my application | YES [ ]  NO [ ]  |
| I have a copy of my most recent financial statements to submit with my application | YES [ ]  NO [ ]  |

**TO SUBMIT:**

Once you’ve completed this on the computer, please print it, sign and date below.

Submit by hand to Council’s Administration Office, 80 Castlereagh Street, Coonamble

Submit by fax to (02) 6822 1626

Submit by post to:

The General Manager
Coonamble Shire Council
PO Box 249
Coonamble NSW 2829

Scan and submit by email to council@coonambleshire.nsw.gov.au, remembering to attach your budget and financial statements as well.

**Signature**: ………………………………………………… **Date**: ………………………………………