

APPLICATION FORM FOR A COMMUNITY DONATION UNDER GLEN INNES SEVERN COUNCIL DONATION'S POLICY

CLOSING DATE: 4:30PM – Monday, 09 September 2024

| Name of Organisation: | | | | |
|-----------------------|-----------------|-----|----|--|
| Postal Address: | | | | |
| Email Address: | | | | |
| Contact Name: | | | | |
| Contact Number: | | | | |
| President: | | | | |
| Secretary: | | | | |
| Treasurer: | | | | |
| ABN: | | | | |
| | GST Registered? | Yes | No | |
| Bank Account Name: | | | | |
| BSB: | | | | |
| Account Number: | | | | |

Eligibility for Financial Assistance

Is your organisation/community group:

| Community based and non profit? | Yes | No |
|---|-----|----|
| Based in, or affiliated with Glen Innes Severn Council LGA? | Yes | No |
| Able to complete the project/activity within 12 months? | Yes | No |
| Have you received any previous grants from Council? | Yes | No |

Project (outline what your organisation is proposing do with the sought donation)

How will the project/activity benefit the Glen Innes Severn Council community and who are the main target groups?

Amount sought: \$_____ Note: applications should be limited to \$1,500.

If you do not receive the full amount sought, will you still be able to complete your project / activity before 30 June 2025? If not, what will your plan be?

If applicable, does this amount include the value of general purpose rates?

Yes No (please tick appropriate box)

If applying for a donation of the value of your organisation's rates, please attach a copy of the last Assessment Notice.

Signature:

(Chairperson or equivalent)

Date: _____

Please return to:

By Post: The General Manager Glen Innes Severn Council PO Box 61 GLEN INNES NSW 2370

By Email: <u>council@gisc.nsw.gov.au</u>

By Hand: 265 Grey Street, Glen Innes.

For further information regarding the Donations Policy or the application process please contact Council on 6730 2300 or <u>council@gisc.nsw.gov.au</u>

Please note recommendations for community donations will be addressed in a report to Council at the October Ordinary Council Meeting with applicants notified in writing in November.

Privacy Statement

Glen Innes Severn Council is committed to protecting your privacy. The personal information you provide in this form is for the purposes directly related to the functions of Council, specifically relating to this form. The information you provide will not be used or disclosed for other purposes unless you provide further consent or as authorised by law. This information is collected under the Privacy and Personal Information n Protection Act 1998 (the Act) and if you require further information, please see our Privacy Management Plan at www.gisc.nsw.gov.au or contact Council on (02) 6730 2300.