

# WHITE ROCK Wind Farm

Community Fund Grant Application

**Application Pack for Projects Seeking  
Under \$5,000**

**Closing Date for Applications:**

**26 April 2019**



# APPLICATION SUMMARY

## Overview

White Rock Wind Farm Community Fund aims to share the benefits of White Rock Wind Farm by investing in the communities around the wind farm. The Funds are intended to provide financial support for community-based initiatives, projects and events that produce lasting community benefit and reflect local priorities.

The Community Fund targets a range of community needs including health and social welfare, safety, environment, education and youth, sport and recreation, culture and heritage, arts and economic development.

## Who Can Apply

Applications are open to any not for profit or community-based organisations.

## Project Duration

Projects receiving grant funding of \$5,000 or under are required to be completed within 12 months from the date of the acceptance letter.

## Assessment Criteria

Applications will be assessed on their merits, based on their benefit to the community, perceived suitability, the background of the applicant, etc. Projects will also be weighted according to their proximity to White Rock Wind Farm with closer projects carrying more weight.

## How to Apply

Applicants should complete the application form and complete and sign the checklist. For all enquiries please phone Anna Watt on 02 6730 2317.

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**Post to:**

Attention: Glen Innes Severn Council  
WRWF Community Fund Application  
c/- Glen Innes Severn Council  
P.O Box 61  
GLEN INNES NSW 2370

**Deliver by hand to:**

Glen Innes Severn Council  
WRWF Community Fund Application  
265 Grey Street  
GLEN INNES NSW 2370

**Email to:**

[council@gisc.nsw.gov.au](mailto:council@gisc.nsw.gov.au)

Subject: WRWF Community Fund Application

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All applicants will be notified in writing of their success, or otherwise, after the 14 June 2019. Funds will be issued by cheque to the contact details provided on the application form.

**Please Note: Applications received after 4.30pm on 26 April 2019 will not be accepted under any circumstances.**

# APPLICATION FORM FOR PROJECTS UNDER \$5,000



**Before completing this form, please read the guidelines attached to this document.**

**Please write legibly when completing this application form.**

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## A: ORGANISATIONAL DETAILS

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1. Name \_\_\_\_\_

\_\_\_\_\_

2. Postal Address \_\_\_\_\_

\_\_\_\_\_

3. ABN: \_ \_ \_ \_ \_

4. Are you registered for GST?    Yes     No

5. What do you do? (brief description of who you are and what you do)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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## B: WHO DO WE TALK TO REGARDING THIS APPLICATION?

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1. Name of Contact for this Application \_\_\_\_\_

2. Position of Contact within the Organisation \_\_\_\_\_

3. Contact Details Work Phone \_\_\_\_\_

Mobile Phone \_\_\_\_\_

Email Address \_\_\_\_\_

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## C: PROJECT DETAILS

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1. Name \_\_\_\_\_

2. Summary of the Project (100 words)?

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3. Outcomes of the Project (100 words)?

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4. Who will Benefit from the Project (100 words)?

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5. Referring to the Eligibility Criteria and General Principles in the Guidelines, please describe how your Project benefits the Community (100 words)?

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6. Project Start Date \_\_\_\_\_ Project Finish Date \_\_\_\_\_

7. How much funding are you seeking? \$ \_\_\_\_\_

8. How many people do you expect will benefit from the Project?

- 0 - 10     
  10 - 25     
  25 - 50     
  50 - 100     
  100+

9. In what Zone is the Project located (see map in Guidelines)?    A    B    C    D    E

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**D: PREDICTED BUDGET (ALL FIGURES MUST INCLUDE GST)**

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**Please complete the following template or attach a separate budget sheet if required.**

| Income                               | \$ Value (incl GST) |
|--------------------------------------|---------------------|
| Money provided by your organisation  |                     |
| Income from other sources            |                     |
| Funding from the WRWF Community Fund |                     |
| In Kind Contributions                |                     |
| Materials                            |                     |
| Volunteer Labour                     |                     |
| <b>Total Project Income</b>          | <b>\$</b>           |
| Expenses                             |                     |
| Materials                            |                     |
| Labour                               |                     |
| Promotion                            |                     |
| Printing                             |                     |
| Other (please list)                  |                     |
|                                      |                     |
|                                      |                     |
|                                      |                     |
|                                      |                     |
| <b>Total Project Expenses</b>        | <b>\$</b>           |

**Note: Income and Expenses must equal each other.**

**Please attach further information if necessary.**

**CHECKLIST**

| Have You  | Yes | No |
|---|-----|----|
| Attached quotes for your project (if required)?   |     |    |
| Identified the goal/s your project supports?  |     |    |
| Identified the aim/s your project meets?  |     |    |
| Organised for the bottom of this checklist to be signed and dated by the head of the organisation?                                    |     |    |
| <p>If you have ticked “no” to any of the above please explain why.</p>  |     |    |
| <p>I hereby confirm that Information contained in our application is correct and accurate at the time of submitting for approval.</p> |     |    |
| <p>Signed:</p>  |     |    |
| <p>Name:</p>  |     |    |
| <p>Position in Organisation:</p>  |     |    |
| <p>Date:</p>  |     |    |

# ACQUITTAL STATEMENT BY GRANT RECIPIENT

The Acquittal and Feedback Forms are to be completed and returned only once the project has been completed.

|                 |  |
|-----------------|--|
| Organisation    |  |
| Project         |  |
| Amount Received |  |

**Certified by an authorised officer of the grant recipient organisation.**

**I confirm that:**

An amount equal to the total Grant paid (\$) has been expended on the Project in accordance with our original application and the WRWF Community Fund Guidelines.

**AND**

A complete set of financial records, or equivalent, relevant to the project have been maintained and are attached to this acquittal together with photos of the completed project.

I hereby certify that I have the authority to sign this Acquittal Form on behalf of the recipient organisation.

|            |
|------------|
| Date:      |
| Signature: |
| Name:      |
| Position:  |

Please return the Acquittal and Feedback Forms to:

Post: Glen Innes Severn Council, WRWF Community Fund Acquittal Form, PO Box 61, GLEN INNES NSW 2370

Email: [council@gisc.nsw.gov.au](mailto:council@gisc.nsw.gov.au) (Subject: WRWF Community Fund Acquittal Form).

**FEEDBACK FORM**

**Did you have any problems completing the project on time/budget?**

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**Were there any unforeseen complications with the project?**

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**Can you suggest any improvements to the process of applying for funds?**

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**Were the applications forms and requested information too complex?**

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**Any other comments or suggestions?**

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***Thank you for any feedback you can provide, it is very helpful!***