Community Benefit Fund

Application details

Applicants should read the guidelines carefully before completing this form. To read the guidelines go to the Northern Territory Government website¹.

Organisation details														
Organisation name:														
ABN: If no ABN, please supply a cop 'Statement by a Supplier' form, obtain the Australian Tax Office website			btaine							GST	registered	d	Yes / N	lo
Number of members in organisation:			n:					,						
Postal address:														
Street address:														
Phone:				Mobile:			::							
Please mark v	vith an X	the typ	e of	organisa	tion									
Incorporated	associatio	on		Unincorporated			Ass	ocia	tions Act (NT)				
Not for Profit	company	/		Office of the Registrar of Indigenous Corporations										
Other, please specify														
Contact detai	ls													
Title:	Mr / M	r / Mrs / Ms / Miss / Other			Other, please specify:									
Full name:	e:					sition ii ganisati	-							
Mobile						Em	nail:							

¹ https://nt.gov.au/community/grants-and-volunteers/grants/community-benefit-fund-major-community-grants



Sponsor details							
Complete if applicant is not incorporated, refer to grant application guidelines							
Sponsoring organisation legal name:							
ABN: If no ABN, ple 'Statement by a Sup the Australian Tax C				GST registered	Yes / I	No	
Postal address:	<u> </u>						
Street address:							
Phone:			М	obile:			
Regional location							
	th an X the regions in the y select more than one reg			•	isation conducts its	main	
Northern (Darwin	and Darwin regional)			Barkly			
Arnhem (incl. Tiwi	Islands, Jabiru, Maningrid	la)		Central			
Katherine							
Please indicate with an X which regional location that will benefit from the grant (you may select more than one region if applicable)							ore
Northern (Darwin			Barkly				
Arnhem (incl. Tiwi	la)		Central				
Katherine							
Activities of the ap	pplicant organisation						
Please briefly describe the activities and services provided by your organisation to the community							

Project description							
Detailed overview of projects should be attached separately							
Project title:							
Project summary:							
Estimated start date:	<u> </u>	Estimated date of completion:					
	now the community will be						
Please briefly describe i	low the community will be	Hent Hom this grant					
Does this project have a	a community development	focus? Please describe					

What capacity does your organisation have to deliver the project?				
What community support and / or involvement doe	s your project have?			
Performance Indicators				
What are the expected outcomes? For example: Obtain certificate of occupancy.				
How will you know if these outcomes have been achieved?				
Capital works and tenancy arrangements				
If your project is for capital works, please advise if the property is owned by your organisation.				
If the property is leased, please provide the lease expiry date, and the name of the property owner.				
Property address (leased or owned):				

If the requested amour your above lease arrang		eeds \$5	0,000 please att	ach supp	orting doc	umentation o	f	
Please indicate with an	X the target group fo	r your p	project (you may	tick mor	e than one	<u>;)</u>		
Indigenous people	Carers		Families Com			ity - general		
Isolated people	Children				People w disabilitie			
Older people	Women		Young people Unemplo			yed people		
Families in crisis situati	ons		Members of et	hnic com	munities			
Proposed budget								
Please summarise your Your detailed budget sl allocated.		_		_			on.	
Budget				Total Co	Total Cost \$			
Total project cost (A):								
Less organisation's contribution to project if applicable (B)								
Less funds to be raised	if applicable (C)							
Total Major Communit	y Grant sought (A-B-C	C)						
If your organisation is C registered, please use C		use GS	Γ exclusive figur	es. If you	ır organisat	tion is not GS	Т	
If full funding is not available would you like your application considered? Yes / No								
The Northern Territory Government supports buying local. If you are unable to obtain Northern Territory quotes please explain why.								

Other funding							
Have you appl your proposed	Yes / No						
-	anisation currently receive funding fr ment sources? If yes, please specify:	om Commonwea	lth, Territ	ory or lo	cal government,		
Funding				Amount	t		
Agreement and	d declaration						
-	e statements in this application are tr y Grants Program guidelines	ue. I have read ar	nd unders	tand	Yes / No		
_	that if the CBF approves this applicat gibility criteria as outlined in the Com	_		-	Yes / No		
I acknowledge	that the CBF will not accept late appl	lications			Yes / No		
I acknowledge program at its	that the CBF may vary the level of fu sole discretion	nding provided th	nrough the	е	Yes / No		
The CBF cannot guarantee funding for any application, and cannot guarantee funding to the full amount requested by any applicant Yes / No							
I have been authorised to make this application by (name of organisation)							
Full name:		Position in organisation:					
Signature:			Date:				
Grant applicati	on checklist		•				

Before submitting your application, please use this checklist to ensure your application is accurately completed. Incomplete applications will not be considered.				
Have you confirmed that your organisation is eligible to apply? (i.e. not-for-profit)	Yes / No			
Is your organisation up to date with all your mandatory reporting under the Associations Act or other legislation?	Yes / No			
Have you provided your organisation's details including your ABN and GST information?	Yes / No			
Have you indicated the region where the funding will be utilised?	Yes / No			
If your group is not incorporated, have you provided details of your sponsor?	Yes / No			
Have you completed the project description and given details of your budget?	Yes / No			
Have you included quotes for all the budget items listed in your application and explained why if quotes are not local?	Yes / No			
Have you advised us of other sources of funding your organisation may receive?	Yes / No			
Does your organisation have any outstanding NT Government grant acquittals?	Yes / No			
Have you provided the name of your Accountable Officer and have they signed the application form?	Yes / No			

Privacy collection notice

Community Benefit Fund (CBF) application forms include the contact details of the nominated officer submitting a grant application.

We collect your personal details to:

- Process the grant application and contact you, as your organisation's representative, updates on the application.
- Provide further information to you, as your organisation's representative, about the CBF grant program
- Collect, maintain, and use your personal information, contained in your organisations application
 as their representative, for our internal administration purposes for purpose of interactions with
 you.
- Provide your organisation's grant application that may include your contact details, to other NT Government agencies, and the Community Benefit Fund Committee.

The CBF will not disclose your personal information to any other third parties unless:

Authorised or required by law to do so or

You have given us your consent to share your personal information for a specific purpose