



# Litchfield Council Community Grants Scheme Community Initiative Grant Application 2019

## Before you Begin

How did you hear about Litchfield Council's Community Grant Scheme?

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## Contact Details

First Name		Surname	
Ph		Email	
Suburb of Residence			
Organisation name (if applicable)			
ABN			
Suburbs of Service			
Have you or your Organisation received a community grant before?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	

## About Your Project/Event

Amount requested from Community Initiative Grant	\$
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Project/Event Title			
Project/Event Start Date		Project/Event End Date	
Project /Event Summary			



**Which area of Council's Strategic Priorities do you think your project falls under?**

*Please tick all that apply*

<b>Everything You Need</b> <input type="checkbox"/> Roads and Transport <input type="checkbox"/> Waste and Cleanliness <input type="checkbox"/> Community and Economic Prosperity	<b>A Great Place to Live</b> <input type="checkbox"/> Culture and Social Life <input type="checkbox"/> Recreation <input type="checkbox"/> Development and Open Space	<b>A Beautiful and Safe Natural Environment</b> <input type="checkbox"/> Animals and Wildlife <input type="checkbox"/> Natural Environment <input type="checkbox"/> Water and Drainage
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**How will funding of this proposed activity benefit the Litchfield Community?**

**What other support does the activity/event have? Are you going to apply for any other funding in relation to this project/event?**

*Include any community assistance and other financial support.*

**How will you publicly acknowledge Litchfield Council's funding?**

*Social media? Club newsletters? Signage? Etc.*



## Agreement and Declaration

The contact person specified above on behalf of the Organisation states that:

<input type="checkbox"/>	I certify that the statements in this application are true. I have read and understand the Guidelines.
<input type="checkbox"/>	I acknowledge that if Litchfield Council approves this application, I will be required to meet the eligibility criteria as outlined in the Guidelines

**Signed:** \_\_\_\_\_

**Full Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

### Attachment Checklist

<input type="checkbox"/>	Detailed project description including dates
<input type="checkbox"/>	Organisations: A copy of your Certificate of Incorporation Registration
<input type="checkbox"/>	Organisations: A copy of Certificate of Currency (Public Liability Insurance) if the project is not on Council property'
<input type="checkbox"/>	Any community support letters
<input type="checkbox"/>	Any other documentation you think will help your application

### Completed Applications should be submitted online, posted, faxed or hand delivered:

Posted	Faxed	Hand delivered
PO Box 446	08 8983 1165	7 Bees Creek Road,
Humpty Doo NT 0836	<b>Email</b>	Freds Pass
	<a href="mailto:grants@litchfield.nt.gov.au">grants@litchfield.nt.gov.au</a>	

#### Importance Notice – Privacy Statement (Information Privacy Act 2009)

Litchfield Council is collecting your personal information in order to administer your application for a grant. Your information will not be given to any other person or agency unless required by law. As part of the process, applicants may be named in Council minutes, which are available for public inspection. Successful applicants **will** be included in Council publications (including our web site) and social media sites unless a specific request for privacy is asked for.