



TOURISM DEVELOPMENT COMMITTEE

Shoalhaven City Council

Application form
Office Use Only

TOURISM DEVELOPMENT COMMITTEE GRANTS APPLICATION 2008-2009

Part 1 : Details of Organisation/Individual

1. Applicant/Organisation :

2. Mailing Address:.....

3. Phone – Home:..... Business:

4. Amount being sought: \$

5. Is the Organisation non profit YES / NO

Number of members: Membership fee: \$.....

Incorporated YES / NO

6. Is your Organisation registered for GST Yes/No. If yes – ABN

7. Does your Organisation have Public Liability Insurance. Yes/No

If yes - Name of the company.....

Policy No..... Amount of Cover \$.....

8. Current Office Bearers (President, Secretary and Treasurer):

.....

9. Contact Person.....Phone.....

10. Signature of Principal Office bearer.....

11. Title of your Project

12. **Total** cost of the project: (Expenditure) \$

13. Funds currently available to go towards project: \$

14. Will other funds be raised:

Yes/No if yes please detail sources and the amounts of the funds

Source	Amount \$
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15. Has Shoalhaven City Council previously fund assisted your organisation? YES / NO

If yes what was the amount from Council?

\$..... Year.....

\$..... Year.....

\$..... Year.....

16. Have you applied for grant funding from other sources? YES / NO

If YES, from whom & how much?

Source	Amount \$
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17. Will this project need ongoing support funding ? YES / NO

18. Does your project have all the necessary approvals in place

- Council agreement (if applicable)

Details

- Development Approval

Details

- Traffic Committee Approval (if applicable)

Details

- RTA Approval (if applicable)

Details

- Other approvals

Details

19. Does your organisation make donations to charities?

Details

Details

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Part 2: The Event/Project

Title

1. Venue or Location of the project ?.....
2. Provide a brief description of the project and detail what specific aspects the Tourism Development Committee Grant will cover .

Part 3 : Please provide brief details of how this project will meet objectives of Shoalhaven Tourism Development Committee in that projects will lead directly to providing facilities and attractions for Visitors to the Shoalhaven.

Objective 1 Briefly describe how the Project will enhance the unique character of the Shoalhaven.

Objective 2 How is the project innovative and imaginative.

Objective 3 Is there community participation and involvement in your project.

Objective 4 Describe how the project will lead directly to providing facilities and attractions for Visitors to the Shoalhaven.

Part 4: Event/Project Budget Information

- Please attach a copy of your organisation's financial report for the last financial year and a detailed budget or forecast budget of the 2008-2009 financial year.

(Please supply another income/expenditure sheet if this form is inappropriate)

Expenditure	Amount
1. Wages/Salaries/Contractors: <i>(give details)</i>	\$.....
2. Other staff related costs:	
Accommodation:	\$.....
Travel: \$.....	
Other: \$.....	
3. Administration:	\$.....
4. Equipment/Materials:	\$.....
4.1 Purchase:	
4.2 Hire:	\$.....
5. Marketing /Advertising:	\$.....
6. Other Project Costs:	\$.....
7. :	\$.....
8. . :	\$.....
9. . . :	\$.....
10. . . . :	\$.....
12. :	\$.....
TOTAL EXPENDITURE	\$.....

Income	Amount
1. Tourism Development Grant requested:	\$.....
2. Donations:	\$.....
3. Member contributions:	\$.....
4. Other Income:	\$.....
5 .:	\$.....
6 .:	\$.....
7 .:	\$.....
8 .:	\$.....
TOTAL INCOME:	\$.....
	(Expenditure should equal income)
