## **Applicant Details**

* indicate	es a required	field					
Applicar  O Individ Organisa		○ Organisa	ition				
Title	First Name	Last I	Name				
Select one	5						
ABN							
	provided wil at you have e				formation.	Click Lookup	above to
Information	on from the A	ustralian Busi	ness Registe	r			
ABN							
Entity nar	me						
ABN statu	ıs						
Entity typ	e						
Goods & S	Services Tax (	GST)					
DGR Endo	orsed						
ATO Char	ity Type		More inform	<u>ation</u>			
ACNC Reg	gistration						
Tax Conce	essions						
Main busi	ness location						
If you have	e an ABN and	intend to clai	m GST pleas	e provide you	r ABN above		
<b>Address</b> Address	of Heritage	e Property	for which	funding is	being sou	ght	
Applicar Owne	nt's Associa	tion with P	roperty *				

- O Occupier/Tennant
  If 'Other' please specify

## **Present Use of Building**

- Residential dwellingCommercial premises

Applicant Email Address *
Must be an email address. Email will be our preferred method of communication.
Applicant Phone Number *
Must be an Australian phone number.
Applicant Postal Address Address
Project Dotails
* indicates a required field
indicates a required held
Briefly describe the project you would like funding for *
Plans, quotes and photos to support the proposed project can be attached at the end of this application.
Amount of Funding Sought *
\$ Must be a dollar amount.
A maximum of \$2000 can be applied for. Up to 100% of the total cost of the project can be applied for.
Estimated total cost of project *  \$
Must be a dollar amount. You are required to attach quotes at the end of this application
Amount contributed by another source (eg. Heritage Victoria)  \$ Must be a dollar amount.
Expected Project Completion Date *
Must be a date. The project must be completed and the claim lodged to enable payment by June 2025.

* indicates a required field
Attach at least 2 quotes or cost estimates from a suitably qualified service provider (this is to provide us with an accurate estimate of the cost of works). * Attach a file:
Please attach a copy of your home and contents insurance (or other document) providing proof of \$10 million public liability insurance. *  Attach a file:
Please provide photos which clearly show: 1. the need for the project and highlight the part of the building covered by the application; 2. a photo of the property facade showing the visibility of the proposed works from the street * Attach a file:
Conditions of Funding
* indicates a required field
The owner agrees:
Not to seek the removal of the property from the heritage overlay. *  O Yes  O No
To use the funding only to carry out the works listed in the application. *  ○ Yes  ○ No
To obtain all necessary approvals prior to carrying out the works. *  ○ Yes  ○ No
To allow Council to use video, photographs or details of the works in its heritage promotional material. *  O Yes O No

By submitting this application, you agree that you have read and understood the conditions above, and that you undertake to abide by each and all of those conditions if this application is successful.

Projects must be able to be completed in time to enable funding to be paid to successful applicants in the 2024/25 financial year.

Failure to comply with these conditions will result in the termination of funding.