

# Swan Value-in-Kind 2023/2024

## Form Preview

### Swan Value-in-Kind

\* indicates a required field

Welcome to the City of Swan's Grant and Sponsorship Program.

Before starting your application, please read the [Resource Guide and the Swan Value-in-Kind Information Sheet](#) for eligibility and assessment criteria.

Please ensure you have discussed your application with the Community Grants Team prior to submission. If you haven't, please call (08) 9207 8693 or email [communitygrants@swan.wa.gov.au](mailto:communitygrants@swan.wa.gov.au), as they are ready to help you.

Please allow 6-8 weeks for your application to be processed. Applications that are incomplete or received outside the minimum lead-time may not be processed in time.

### Confirmation of eligibility

#### I confirm that I:

- Hold a current Certificate of Currency for Public Liability Insurance of \$20 million (if applicable)
- Am not requesting support for a project that promotes the advancement of a political or religious organisation or lobby group
- Am not requesting support for a project that is part of or a duplication of a current Government service
- Am not requesting support for costs already funded by another grant or sponsorship
- Am not requesting support for recurrent or core operating costs
- Will not attempt to contact or lobby an Elected Member of the City of Swan regarding this or another Organisation's application

#### All Statements above are true and correct \*

☐ Yes ☐ No

#### I have read and understood the Resource Guide and the Swan Value-in-Kind Information Sheet \*

☐ Yes

#### I have discussed this application with the Community Grants Team \*

☐ Yes

#### I am an individual resident of the City of Swan and or my initiative will be delivered within the City of Swan

☐ Yes ☐ No

#### I have no outstanding debts with the City of Swan \*

☐ Yes ☐ No

If you answered NO to any above eligibility questions you may not be eligible for a Swan Value-in-Kind contribution. Please contact the Community Grants Team on (08) 9207 8693 before proceeding with this application.

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### Privacy Notice

The City of Swan pledges to respect and uphold your rights to privacy protection under the Australian Privacy Principles (APPs) as established under the Privacy Act 1988 and amended by the Privacy Amendment (Enhancing Privacy Protection) Act 2012. To view our privacy statement, go to <https://www.swan.wa.gov.au/General/Legal/Privacy-Statement>

### Applicant details

#### Applicant Name \*

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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#### Applicant Project Contact

First Name Last Name

<input type="text"/>	<input type="text"/>
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#### Contact Person Phone Number \*

Must be an Australian phone number.

#### Contact Person Email \*

Must be an email address.

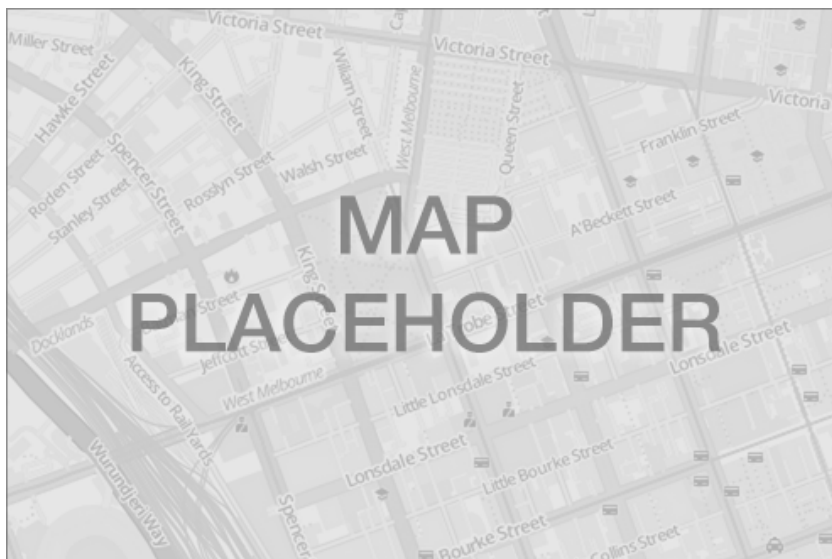
#### Organisation Address \*

Address

<input type="text"/>
<input type="text"/>

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Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

### Applicant ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

### Are you incorporated, if yes please attach copy of certificate

Attach a file:

### Do you require Auspice? \*

☐ Yes ☐ No

Auspicing (only for un-incorporated groups)

### Auspice

☐ Individual ☐ Organisation

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Organisation Name

Title

First Name

Last Name

### Auspice Primary Contact Person

Please include full name. This is the person best placed to discuss the application and project

### Auspice ABN

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register	
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

### Auspice Primary Address

Address

### Please upload a copy of Incorporation Certificate

Attach a file:

### Auspice Primary Phone Number

Must be an Australian phone number.

### Auspice Primary Email

Must be an email address.

### About Us

\* indicates a required field

**What is the primary purpose of your Organisation? \***

Word count:

Must be no more than 100 words.

**Have you had previous funding from the City of Swan? \***

☐ Yes

☐ No

**If Yes to above, have you acquitted all previous funds from the City?**

☐ Yes

☐ No

**Please upload a copy of your Public Liability - Certificate of Currency \***

Attach a file:

**Please upload a copy of your Certificate of Incorporation \***

Attach a file:

### Initiative Details

\* indicates a required field

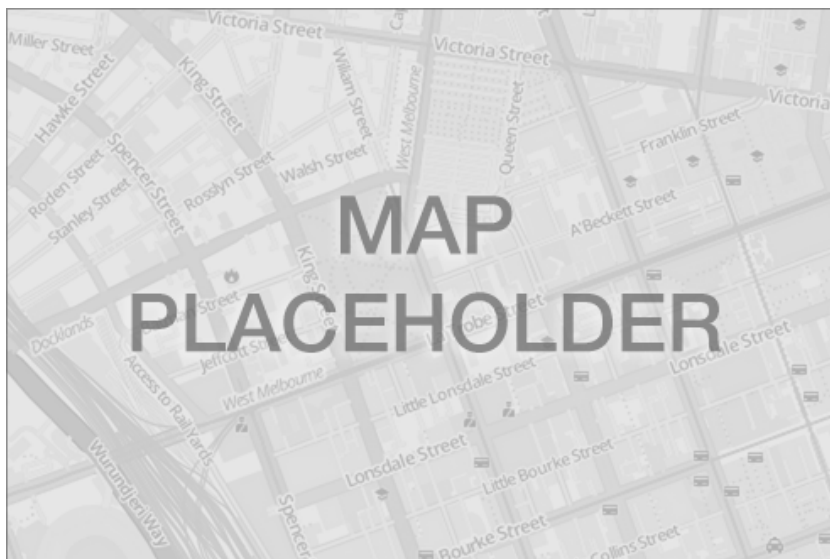
**What is the title of your initiative ?**

**What is the Address of the initiative \***

Address

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Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.  
Where this init

### What is the purpose of this initiative? \*

Word count:

Must be no more than 100 words.

### Please identify the primary Objectives from the City's Strategic Community Plan, which your initiative aligns. \*

- |                                                                                             |                                                                                         |
|---------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| <input type="checkbox"/> Actively support and develop thriving local businesses and centres | <input type="checkbox"/> Build a strong sense of community health, wellbeing and safety |
| <input type="checkbox"/> Build social inclusion and connectivity in local places and areas  | <input type="checkbox"/> Sustainable and optimal use of City resources                  |

At least 1 choice must be selected.

### Please briefly explain how your initiative supports these Objectives. \*

Word count:

Must be no more than 100 words.

### Please describe how your initiative will have a positive benefit to the local and broader community. \*

Word count:

Must be no more than 100 words.

### Please provide a short summary of your Organisation's capacity to deliver this initiative. (Can it be achieved and how?) \*

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Word count:

Must be no more than 200 words.

**Please summarise in bullet points your initiative key outcomes. \***

Word count:

Must be no more than 100 words.

**How will you know if you have achieved your initiative outcomes? \***

**How do you plan to assess and measure the benefits and success of the initiative?**

\*

- |                                                  |                                          |                                                           |
|--------------------------------------------------|------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Number of attendees     | <input type="checkbox"/> Survey feedback | <input type="checkbox"/> Positive community impact        |
| <input type="checkbox"/> Number of participants  | <input type="checkbox"/> Media releases  | <input type="checkbox"/> Positive feedback from community |
| <input type="checkbox"/> Number of volunteers    | <input type="checkbox"/> Media publicity | <input type="checkbox"/> Other                            |
| <input type="checkbox"/> Social media engagement |                                          |                                                           |

At least 1 choice must be selected.

## Support Type

\* indicates a required field

**What type of support do you require? \***

- ☐ Venue Hire      ☐ 240 Litre Bin Hire      ☐ Other

### Venue hire

Please note:

If there is a non-refundable bond for the venue this is to be paid by the applicant.

**Venue Name and Address**

Address

**Hire Date**

Must be a date.

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### Hire Date End

Must be a date.

### Estimate Cost

Must be a dollar amount.

Sourced when you obtain a quote or book the venue.

### Please upload your booking, quotes or other additional information

Attach a file:

Have you read the Public Events Guidelines and completed the application? See the City of Swan [Organising a Public Event webpage](#).

Booking a City of Swan Venue? See here for [Facility hire booking enquiry](#)

Filling out this application does not ensure the booking of any City of Swan venues or Public Event Approval, please complete your booking/event request before submitting this application.

## Provision of 240 Litre Bins

Please note recycle bins are supplied free when requested.

### Name of Venue and Address

Address

### Date of Delivery

Must be a date.

### Date of Collection

Must be a date.

### How many bins required?

### Estimated Cost of Bin Hire

Must be a dollar amount.

(\$20.00 incl GST) Sourced when you obtain a quote or book the venue.



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### Please upload your booking, quotes or other additional information

Attach a file:

Have you read the Public Events Guidelines and completed the application? See the City of Swan [Organising a Public Event webpage](#).

Filling out this application does not ensure the booking of any bins or Public Event Approval, please complete your booking/request before submitting this application.

Please see here for [Waste fees and charges](#) on booking bins

## Other

### Description of other value-In-kind donation \*

Word count:

Must be no more than 100 words.

If not in the above, please advise what you are requesting the City to provide e.g. signage, additional verge collection, garden maintenance, projector, pa system, events kit, etc.

### Start Date

Must be a date.

### End Date

Must be a date.

### Estimated Cost

\$

Must be a dollar amount.

### Please upload your booking, quotes or other additional information

Attach a file:

## Declaration

\* indicates a required field

This application must be made by an authorised person on behalf of the Applicant Organisation.

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I certify that the statements made below and within this application are true and correct, and I understand that we are required to use the funding for the budget items indicated. I further understand and accept that by submitting this application I:

- Will be required to provide evidence of the project's acknowledgement of the City's support, e.g. Screenshots of social media posts, announcements, newsletters with appropriate use of the City's logo.
- Understand any changes to a successful grant require prior approval from the City by contacting the Community Grants Team on 9207 8693 or [communitygrants@swan.wa.gov.au](mailto:communitygrants@swan.wa.gov.au).
- Will need to provide a full acquittal which provides full evidence of project expenditure and the projects achievements within three months of the projects end date. This acquittal will need to include copies of receipts.
- Will be responsible for consequences of non-acquittal as outlined in the Resource Guide.
- Give permission to the City of Swan to contact any persons or Organisations in the assessment or review of this application and understand that information may be provided to other agencies as appropriate.
- Give permission to the City of Swan to use Organisation and Project details and/or imagery for listing on a Public Reporting Platform (only non confidential - under Privacy Act 1988).

**I agree \***

☐ Yes

☐ No

### Name

Title

First Name

Last Name

### Phone Number

Must be an Australian phone number.

### Email

Must be an email address.

## Good News Stories

The City would love to run a story about your experience on our Website or Social Media Page. We would love to hear about your experience please send in photo's and a short story about your experience to [communitygrants@swan.wa.gov.au](mailto:communitygrants@swan.wa.gov.au)