

## City of Bayswater



# 2020/21 Community Capital Works Requests Application Form CLOSING DATE - 4pm, Friday 24 January 2020

The following information will need to be completed prior to consideration of the request by the City of Bayswater. The intent of this document is to fully clarify what your proposed project is and the intended outcomes. Projects will be assessed for consideration as part of the City of Bayswater annual capital works program. Submitting an application does not guarantee funding/support towards the project. Any funds approved will be available from 21 July 2020.

For quotations relating to building works or refurbishment, the club must meet with the Project Services Officer prior to quoting on-site. All applicants <u>MUST</u> supply two (2) written quotations within their application, please ensure quotations are attached to your submission.

SECTION 1 APPLICATION DETAILS					
Club/Organisation					
Club Name					
Club Address					
Contact Person					
Position In Club					
Phone					
Mobile					
Email Address					
Postal Address					
Website address					
Incorporation					
Is your club or organisation currently incorporated?			Yes		No
Goods and Services Tax (GST)					
Is your club or organisation currently registered for GST?			Yes		No
Australian Business Number (ABN)					
Do you have an ABN? ABN Number:			Yes		No

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Membership Please provide membership numbers for the past three years				
Туре	2019/20	2018/19	2017/2018	
Senior				
Junior				
Other members, i.e. social, non-playing				
Number of members who are City of Bayswater residents?				
SECTION 2 PROJECT BACKGROUND				
Facility Details				
Facility Name				
Facility Address				
Do you have a lease agreement with the City?	Yes No			
Are all clubs within your association or committee working together for this project?	Yes No			
Is the project supported by the committee or association named within the lease agreement of your facility?	Yes No	N/A		
Please attach a copy of your clubs most recent AGM approved accounts	Yes No			
Sport/Community Group Benefits List the main sports, recreation activities, and clubs which will benefit from your proposal and how?				
Sport/Community organisation	How?			

#### **COPY THIS PAGE AND USE FOR EACH PROJECT**

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SECTION 3 PROJECT DETAILS					
If you are applying for multiple projects you are required to prioritise each project below and complete a project details and project criteria section for each project (Maximum three projects)					
PROJECT DETAILS	PROJECT PRIORITY NUM	MBER:			
Description of Project					
Project Cost					
What is the estimated project cost?	\$				
2 x written quotes are required for each project app	lication.				
Funding Source		Amount \$	Confirmed (Yes / No)		
Club contribution - Please provide supporting evidence including	ng GST component	\$			
City of Bayswater - Amount requested for this project		\$			
Other - please specify (example; Federal, State or funding grants	5)	\$			
Total Project Cost Including GST		\$			
PROJECT CRITERIA Priority 1: Criteria					
<ul><li>1. Needs assessment</li><li>1.1 How did you establish a need for your project?</li></ul>					
2. Community benefit  How will the project benefit your organisation, increase community involvement, participation and/or physical activity in the City of Bayswater?					
3. Impact on organisation  Describe how critical the project is to your organisation's core  Rate the importance from 1 low - 10 high	activities and objectives,				

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SECTION 4 DECLARATION					
Executive Declaration					
The applicati	The application should be signed by the accountable officer of the incorporated body, usually the President.				
The Organisation acknowledges and agrees that this Application and information regarding it is subject to the Freedom of Information Act 1992 and that the City of Bayswater may publicly disclose information in relation to this Application, including its terms and the details of the Organisation.					
	ayswater may wish to provide certain information to the media for promotional purposes. For example the club location, funding purpose, project activity and funding amount.				
I certify that	the information given in this document is true and accurate.				
Name					
Position					
Signature					
Date					
<b>SECTION 5</b>	APPLICATION SUBMISSION				
These form	s, along with any supporting documentation are to be returned by 4pm Friday 24 January 2020				
to: mail@b	ayswater.wa.gov.au				
<u>Or</u>					
City PO	ject Services v of Bayswater Box 467 PRLEY WA 6943				
For more in	formation please contact Project Services, by phone 9272 0612				
SECTION 6	CHECKLIST CONTROL OF THE CONTROL OF				
	☐ Approval from the President or Executive Officer of the Association or Committee named in				
the lease agreement (if applicable).					
	Application forms completed (Required)				
	Project plans / drawings attached (if applicable)				
	Provide copy of most recent club AGM accounts (Required)				
	Met with Project Services Officer on-site prior to quotes for building works or refurbishment (Required)				
	2 x quotations attached to support each project (Required)  Page 4				

Other supporting documentation attached (Optional)