

2024/2025 MCCBF Application Form - Organisation

Form Preview

Important Notes

* indicates a required field

BEFORE you submit an application please ensure you have read the [Mayor and Councillors' Community Benefit Fund Program Guideline GTS-001-005-G](#). Please be aware that your application may be delayed or declined if your application is not properly made.

Organisation Applicant Details

Organisation Name *

Organisation Name

The organisation name must be the same as the ABN details if applicable and the applicant must be based within the Redland City.

Eligibility

Is your organisation not-for-profit? *

- ☐ Yes
- ☐ No - ineligible

Is your organisation incorporated? *

- ☐ Yes
- ☐ No - Sponsoring organisation required

Un-incorporated organisations **MUST** be sponsored/auspiced by a not-for-profit organisation that is incorporated and able to accept legal and financial responsibility for the project or activity. This includes branches/sub-branches using their Head Office's ABN/Incorporation Number. A Sponsor/Auspice agreement template is available [here](#).

Incorporation Number / Australian Company Number? *

Note: this is not your ABN Number

- ☐ Associations Incorporation Act 1981 (Qld)
- ☐ Corporations Act 2001 (Cwlth)
- ☐ Corporations (Aboriginal and Torres Strait Islander) Act 2006 (Cwlth)

Organisation details

* indicates a required field

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Organisation Applicant Details

Organisation Contact Person *

Organisation Name

Position in Organisation *

Please note: the application is to be certified by an authorised financial delegate of the applicant organisation.

Organisation Primary Address *

Address

Suburb State Postcode

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

Organisation Postal Address

Address

Suburb State Postcode

Must be an Australian postcode.

Applicant Primary Phone Number *

Must be an Australian phone number.

Organisation Primary Email *

Must be an email address.

A organisational email address is preferred.

ABN Details

Does your Organisation have an ABN? If so it must match the Organisation details. *

- ☐ Yes
☐ No

Applicant ABN *

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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	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

If you do not have an Australian Business Number (ABN) it is mandatory that you submit a completed Statement by a Supplier Form with your application. [Please find](#) link to ATO page where the current Statement of Supplier Form is available.

Statement by Supplier form *

Attach a file:

Form to be completed and attached if applicant does not have an ABN

Sponsor Organisation

* indicates a required field

Only a not-for-profit organisation that is incorporated can sponsor/auspice another organisation for funding from the Mayor and Councillors' Community Benefit Fund Program.

The sponsor must accept legal and **financial responsibility for the project and/or activity.**

Is your organisation a not-for-profit incorporated entity? *

- ☐ Yes
☐ No - Ineligible to be a sponsor/auspice

Organisations must be incorporated to sponsor/auspice on behalf of a non-incorporated group. A sponsor is not required to be based within the Redland City but the Applicant is required to be based in Redland City.

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Incorporation Number / Australian Company Number *

Note: this is not your ABN Number

Under which Act is the organisation incorporated?

- ☐ Associations Incorporation Act 1981 (Qld)
☐ Corporations Act 2001 (Cwlth)
☐ Corporations (Aboriginal and Torres Strait Islander) Act 2006 (Cwlth)
☐ Other:

Sponsor Organisation Details

Sponsor Organisation Name

Organisation Name

Sponsor Organisation Primary Contact Person

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Position in Organisation

Sponsor Primary Address

Address

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

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be an Australian postcode.

Sponsor Postal Address

Address

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

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be an Australian postcode.

Sponsor Primary Phone Number

Must be an Australian phone number.

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Sponsor Primary Email

Must be an email address.

Agreement

Written agreement from sponsoring organisation to take on the management and financial responsibility for the project activities must be provided. *

Attach a file:

ABN Details

Does your Organisation have an ABN? *

- ☐ Yes
☐ No

Sponsor Organisation Australian Business Number (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	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

If you do not have an Australian Business Number (ABN) it is mandatory that you submit a completed Statement by a Supplier Form with your application. [Please find](#) link to ATO page where the current Statement of Supplier Form is available.

Statement by Supplier Form *

Attach a file:

Form to be completed and attached if applicant does not have an ABN

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Project Details

* indicates a required field

Total Amount Requested. *

\$

Must be a dollar amount.

What is the total financial support you are requesting in this application?

Total Project Cost. *

\$

Must be a dollar amount.

What is the total estimated cost of your project?

Project Title *

Maximum 10 words

Project Description/Funding Use *

What are you planning to purchase with the funding? Maximum of 100 words

What is the timeframe of the project / event?

The date must be a minimum of **20 business days from the date you submit this application.** A project / event cannot commence until funding has been approved.

When will the project take place? *

Must be a date.

Retrospective funding is deemed an in-eligible activity. The project / event cannot commence before application approval. Please consider public holidays when considering your project/event date.

Is the project activity to be conducted in the Redland City? *

☐ Yes

☐ No - Ineligible to apply

Projects must be conducted in Redland City to be eligible for funding.

What is the physical address of the project / event? *

Please provide the physical location for the project delivery. Projects or activities on Quandamooka Country, Council or State Government land may require specific consultation. Please contact Council on 3829 8999 for further advice.

Land Owners Consent

Land Owners Consent may be applicable for Council or State Government owned premises or if you are undertaking a project / event on Council or State Government land. If the land is Council owned or you are not sure please contact 3829 8999 for further advice or visit Council's webpage [here](#). Please note Land Owners Consent may take up to 8 weeks to process. If Land Owners Consent is required this MUST be obtained prior to submitting your application.

Who is the owner of the land or facility where the proposed project is to be located? *

- ☐ Applicant Organisation
- ☐ Council
- ☐ State Government
- ☐ Other (please specify below)

Other details

Do you have Land Owner Consent/Venue Booking Confirmation?

- ☐ Yes ☐ No

No more than 1 choice may be selected.

Note this may not be required for every project but please confirm with Council prior to submitting your application if your project/event is being held on Council owned land.

If you have not already been granted Land Owner's Consent for this activity/ Confirmation of Venue Booking, please contact Council on 3829 8999 to discuss or visit Council's webpage [here](#). Land Owner's Consent/Venue Booking Confirmation MUST accompany your application.

Please attach written Land Owner's Consent or Venue Booking. *

Attach a file:

A minimum of 1 file must be attached.

Grant applications cannot proceed if either of the above mentioned documents are required and not attached. If you do not believe your event/project requires Land Owner's Consent please contact Council to discuss this matter further. Phone (07) 3829 8999.

[Refer to the Our Future Redlands - A Corporate Plan to 2026 and Beyond](#)

Indicate which Redland City Council Strategic Themes the project aligns with? *

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- ☐ Strong Communities
- ☐ Quandamooka Country
- ☐ Natural Environment
- ☐ Liveable Neighbourhoods
- ☐ Thriving Economy

Please choose at least one of the above.

Please indicate which objective/s the project aligns with. *

- ☐ Demonstrates a purpose for the benefit of the community
- ☐ Demonstrates improved community facilities located in Redland City

Please choose at least one of the above

Please demonstrate how the broader Redlands community benefit from your project / event?

Word count:

Must be no more than 150 words.

Please demonstrate how your project will improve community facilities located in Redland City?

Word count:

Must be no more than 150 words.

Describe any financial sponsors/partners and their involvement with this project / event. *

Word count:

Must be no more than 200 words.

How will you acknowledge Council for this funding, should your application be successful? *

Funding recipients MUST acknowledge assistance provided by Council in any relevant publicity and documentation such as Newsletters, Social Media or Signage. Please retain a copy of any relevant publicity/documentation to submit to Council when acquitting the funding.

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Funding Expenditure

* indicates a required field

Application MUST be accompanied by quotes from two separate providers with identical quantities and amounts for the funding expenditure.

If GST is applicable it must also be shown on each quote submitted.

Attaching one quote twice will not be accepted and will delay the assessment of your application.

Expenditure

Please complete the following table and attach corresponding quotes.

Please note that quotes must itemise each item to be purchased

Identify specific expenditure items - eg hiring of rides, marquee purchase, type of equipment / supplies.

Item/s to be purchased	Quote 1 - Supplier Name	Quote 1 - Amount	Quote 2 - Supplier Name	Quote 2 - Amount
		\$		\$

Are the above quotes inclusive or exclusive of GST? *

☐ Inclusive ☐ Exclusive

Do the quotes clearly show the GST amount? *

☐ Yes
☐ No - ineligible

Please indicate your preferred choice of supplier/s. *

☐ Quote 1 ☐ Quote 2
OR

Provide preferred supplier/s name

Quote 1 for funding expenditure - Provider 1 *

Attach a file:

A minimum of 1 file must be attached.

If GST is applicable it must be shown on each quote submitted.

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Quote 2 for funding expenditure - Provider 2 *

Attach a file:

A minimum of 1 file must be attached.

If GST is applicable it must be shown on each quote submitted.

Additional quote information in support of your application (if applicable).

Attach a file:

Bank Account Details

* indicates a required field

All funding payments through the Mayor and Councillors Community Benefit Fund are made by electronic funds transfer (EFT) to your organisation's nominated bank account or, **if sponsored, to your sponsor's nominated bank account.**

It is recommended that you consult with your Treasurer to confirm account details.

Please note delays will be incurred if the organisation is already in Council's financial system and the bank account details provided below are different to Council records. Please contact Council on 3829 8999 should you wish to confirm or change banking details.

Bank Account Details *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Please enter your organisation's account name or your sponsor's organisation account name, not the name of the bank.

Name of Bank

Certification

* indicates a required field

I have read the Mayor and Councillors' Community Benefit Fund Program Guidelines *

☐ Yes

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To be certified by an authorised financial delegate of the applicant organisation. ie CEO, President, Treasurer, Secretary or Chair.

- I certify that to the best of my knowledge the statements made in this application are true.
- I understand that if the Redland City Council approves the grant, I will be required to accept the terms and conditions [MCCBF Funding Agreement Terms & Conditions](#) of the grant in accordance with Redland City Councils Audit requirements.
- I consent to the information contained within this application being disclosed to or by Redland City Council for the purpose of assessing, administering, reporting and monitoring my current and any future Redland City Council grant applications.
- I consent to be on the mailing list for use by Redland City Council to promote other Council opportunities, programs and services.
- I understand that if Redland City Council approves the grant, I will be bound by the contents of my application to carry out my project as I have described and my application will form part of my contractual agreement with Redland City Council.
- Unless otherwise agreed by Council, the applicant must fully acquit the funding received, no later than 90 days from the date of the event/project.

I agree with the above and the [MCCBF Funding Agreement Terms and Conditions](#)

*

☐ Yes

Full Name *

Title First Name Last Name

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Position in the Organisation *

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Declaration to be signed by an authorised financial delegate of the applicant organisation. ie CEO, President, Treasurer, Secretary or Chair.