

Application Form COVID19 Business Diversification

Form Preview

Guide for Applicants

Getting Help

The Grants Officer is available if you require assistance applying online, or have questions about your application.

Contact the Grants Officer on (03) 5232 9400 or EcoDev@colacotway.vic.gov.au

Please allow sufficient time to prepare and submit your application before the closing date.

Smartygrants provides an easy way for grant seekers to complete their application form online. The [help guide for applicants](#) will explain the essential steps you need to take to complete and submit a form. You can also download it in PDF. There is also an [Applicant FAQ](#) page available.

Checklist before you start

You may require the following before starting your application.

- Read and understand the program guidelines before completing the application.
- Prepare your budget - list all Income and Expenses
- Have you got a dollar for dollar cash matching contribution.
- Public Liability Insurance Certificate of Currency for the activities that are the subject of this grant, if applicable to your project.
- Quotations for your project expenses. Applicants are encouraged, but it is not mandatory, to obtain more than one quote as part of the application.
- At least 50% of this grant should be spent locally where possible.
- Landowner or Land manager consent if required.
- Does applicant have any outstanding Acquittal Reports or owe money to Colac Otway Shire as a result of previous funding or grants. If these are outstanding please discuss with the Grants Officer before proceeding with the application.

Applicants Please Note

Before completing this application form, you should have read the **COVID19 Business Diversification Grants Funding** guidelines. [CLICK HERE](#)

NOTE: Successful recipients in the Building Facade Improvement Program and/or Small Business Energy and Water Efficiency Upgrade Program are eligible to apply for this grant.

Incomplete applications and/or late applications will not be considered.

Eligibility

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* indicates a required field

Eligibility Declaration

This section of the application is designed to help you, and us, understand if you are eligible for this grant. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regards to these eligibility criteria, please contact the Grants Officer on (03) 5232 9400 or grants@colacotway.vic.gov.au

I confirm the applicant

- ☐ Has read and understands the program guidelines.
- ☐ Is a business located within the Colac Otway Shire.
- ☐ Has a valid ABN as at 1 March 2020.
- ☐ Has 20 or less permanent full time employees (FTE).
- ☐ Has been successful in receiving funding through a state or federal government COVID19 grants/subsidy program, demonstrating that the business has been financially impacted by the pandemic.
- ☐ Will spend at least 50% of this grant locally.
- ☐ Has the appropriate type and level of insurance for the activities that are the subject of this grant.
- ☐ Does not have any outstanding Acquittal to Colac Otway Shire as a result of previous funding or grants (with the exception of the current rounds)
- ☐ Will not commence the project prior to the outcome notification of this application. or:
- ☐ Is applying for a project completed between 15 March 2020 and the outcome notification of this application.

Please confirm

*

- ☐ Yes, I confirm all eligibility statements are true and correct
- ☐ No, I do not meet all of the eligibility criteria, and therefore should not proceed with the application.

No more than 1 choice may be selected.

Contact Details

* indicates a required field

Applicant Details

Business name *

Organisation Name

Business Property Address

Address

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Primary contact person *

Title First Name Last Name

This is the person we will correspond with about this grant

Position held in business *

Ensure you are authorised to act on behalf of the Applicant Business.

Primary phone number (prefer a mobile number) *

Must be an Australian phone number.

Back-up phone number

Must be an Australian phone number.

Primary contact person's email address *

This is the email we will use to correspond with you about this grant.

Business Details

* indicates a required field

Australian Business Number

What is your 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	

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Main business location

Must be an ABN

Paid Employee Details

How many permanent FTE paid staff? *

Must be 20 or less to be eligible

How many are Full-time, Part-time, or casual?

Do not include contractors who are engaged

Insurance

Provide a Public Liability - Certificate of Currency

Attach a file:

Can upload more than one type of insurance, if held

Project Details

* indicates a required field

Project Details

If your application is successful, the details you provide below will be published on Council's website, facebook page and local media.

- Name of the Applicant organisation
- Title of the Project
- Description of the project and intended outcomes
- Amount of funding awarded.

Project title: *

Must be no more than 25 words.

Provide a name for your project. Your title should be short but descriptive.

Please provide a short description / summary of your project. *

Word count:

Must be no more than 50 words.

Be short and descriptive. You can tell us more about your project in later sections.

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What is the property address for the proposed works? *

Provide location address for your project

Will the project be undertaken or installed on land that is owned or managed by the Applicant organisation? *

- ☐ Yes
☐ No

No more than 1 choice may be selected.

If you do not own the land or infrastructure that you require to undertake your project on, you must provide evidence that you have the appropriate authority to use the land or infrastructure. Please attach the Land owner or Land Manager's consent

Attach a file:

Anticipated start date *

If unknown, provide your best guess

Anticipated end date *

If unknown, provide your best guess

Budget

*** indicates a required field**

BUDGET

Outline your project budget in the income and expenditure tables below with clear descriptions for each budget.

Use the 'Comments' column to mark the items, with an X, that the grant funds will be spent on.

Quotes will need to be provided in the file upload area below the tables.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT).

Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

Grant Amount Requested *

Must be a dollar amount.

What is the total grant amount that you are requesting?

Budget

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Income	\$	Expenditure 'X' mark grant expenses	\$
Grant requested	\$		\$
Your cash contribution			

Budget Totals

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

Quotation(s) required

Provide a quote(s) to verify the costs of your project.

Please attach quote(s) for expenditure (cost) items *

Attach a file:

A minimum of 1 file must be attached.

Quotes must be dated after the 1 March, 2020.

Assessment Criteria

* indicates a required field

Previous Funding Support

Provide details of any previous funding support by Colac Otway Shire

Year

\$ Amount

		Must be a dollar amount.
		\$

Assessment Criteria - COVID19 Business Diversification Grants

To be competitive your responses need to provide enough information on the project to allow for assessment. The assessment criteria are weighted as indicated in the guidelines.

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The amount of details and supporting evidence you provide should be commensurate with the project size - complexity and grant amount requested.

You may attach other documents that support your application noting that the total file size of all attachments to the application cannot exceed 10MB.

Are the proposed works or equipment upgrades in response to Covid19 requirements? *

- ☐ Yes
☐ No

Assessment Criteria 1 - To what degree does the project support a fundamental change in the way your business operates? (Weighting 40%) *

Word count:

Must be no more than 500 words.

You may wish to provide a response to the following: Will your project be about new equipment purchases? Will it investigate a new business fit out, changes or upgrades? Provide staffing training and education directly related to the Covid-19 situation? Or setting up a business website/e-commerce site or online booking software?

Assessment Criteria 2 - To what extent does the project help create new jobs or retain existing jobs? (Weighting 20%) *

Word count:

Must be no more than 250 words.

You may wish to provide a response to the following: • Any affects or pressure on staffing levels as a result of COVID-19. • How the project will assist in retaining existing staff?

Assessment Criteria 3 - To what extent does the project provide benefit to your customers and the community? (Weighting 20%) *

Word count:

Must be no more than 250 words.

In your response, please describe: Ways in which the project improves the customer experience. Positive flow on effects from the project to the wider community. If the project strengthens the Colac Otway Brand.

Assessment Criteria 4 - What local providers and supply chains are being used to deliver the project? (Weighting 20%) *

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Word count:

Must be no more than 250 words.

You may wish to provide a response to the following: Which works are being performed by local suppliers. Any materials being sourced locally. Benefits from the project that reduces leakage of discretionary spending to other regional or neighboring areas.

Provide a detailed description of the proposed project including how it will be delivered. *

Word count:

Must be no more than 250 words.

What impacts have COVID 19 had on your business? Please describe impacts on revenue, staffing and any government support the business has received. *

Word count:

Must be no more than 250 words.

Please provide evidence of government support the business has received (This may be in the form of an e-mail or bank statement) *

Attach a file:

Have you discussed the proposal with any Council departments regarding permits that may be required? *

- ☐ Planning Department
- ☐ Building Department
- ☐ Health Protection Unit
- ☐ No, I haven't contacted these departments yet

Who did you speak with at Council about any Planning, Building or Health department requirements, and when?

Provide name, department and date of contact

Select from the list below, how your business has or will diversify?

- ☐ New Equipment Purchase
- ☐ Business fitout/changes/upgrades
- ☐ Staff Training and education directly related to COVID19 adaption
- ☐ Setting up a business website/e-commerce site or on-line bookings software
- ☐ Other:

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What percentage of works and/or equipment will be procured locally? *

Please list Colac Otway Shire local suppliers and/or trades. *

Please provide any supporting information to your application.

Attach a file:

Please provide photos of the site or website etc. before the works commence.

Attach a file:

Certification and Feedback

*** indicates a required field**

Privacy Notice

The Colac Otway Shire Council is committed to protecting your privacy. We collect and handle any personal information about you or a third party in your application, for the purpose of administering your grant application and informing the public of successful applications.

In order for us to administer your grant application effectively and efficiently, we may need to disclose your personal information with others for the purpose of assessment, consultation, and reporting. This can include Council staff or Councillors.

Any personal information about you or a third party in your correspondence will be collected, held, managed, used, disclosed or transferred in accordance with the provisions of the *Privacy and Data Protections Act 2014 (Vic)* and other applicable laws.

The Council will publish information on individual grants in the public domain, including on Council's website and social media, unless otherwise prohibited by law.

Smartygrants Privacy Policy

[Click Here](#) to view the Smartygrants Privacy Policy

Applicant Declaration

This section must be completed by an appropriately authorised person on behalf of the business (may be different to the contact person listed earlier in this application form).

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I certify that to the best of my knowledge the statements made within this application are true and correct and not misleading, and I understand that if the applicant business is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the Funding Agreement.

I declare that I have read and understood the program guidelines, including the privacy disclosure provisions as outlined above.

I declare that the applicant business will comply with, and require that its subcontractors and independent contractors comply with all applicable laws and regulations including the Building Code and Workplace Health and Safety regulations.

I acknowledge that I may be requested to provide further clarification or documentation to verify the information supplied in this form.

I acknowledge that it is the Applicant's responsibility to obtain any permits required and that the successful outcome of this application does not override any of these requirements.

I agree *

☐ Yes

☐ No

Name of authorised person *

Title

First Name

Last Name

Must be authorised by the business to make this application on their behalf

Position *

Business Name *

Contact phone number *

Must be an Australian phone number.

Contact Email *

Must be an email address.

Date *

Must be a date

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

☐ Very easy

☐ Easy

☐ Neutral

☐ Difficult

☐ Very difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60 minutes

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Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.