

**2019-2020
SES Support Grant**

Application Form

OFFICE USE ONLY

Date Application Received		Eligibility Assessment	<input type="checkbox"/> Pass <input type="checkbox"/> Fail
Application Number		RM Priority	

Applications must be lodged electronically by 30 November 2018

Before completing this application form, refer to the Funding Guidelines available from the SES Website (www.ses.qld.gov.au) or QFES Grants (QFES.Grants@qfes.qld.gov.au).

Applicant Information

1. Complete one application per subsidy sought. Do not apply for multiple subsidies on the same application.
2. Prioritise your applications from 1 onwards (1,2,3,... with 1 being the highest priority) if you are submitting more than one application.
3. Consult your respective Local Controller when developing your application.
4. Answer each question in the space provided. Write "NA" if a question does not apply.
5. Stipulate all prices as GST exclusive.
6. Provide any further details you feel are applicable on a separate sheet. Reference and attach any further details with the application form.
7. QFES Grants will provide Applicants with a number for each application. Refer to this application number in all correspondence/queries.

For further information contact QFES Grants: P: 3635 1575 / E: QFES.Grants@qfes.qld.gov.au



Section 1 Applicant Details

Name of Local Government			
ABN			
Street Address			
Postal Address			
Contact Officer		Position	
Phone (bus)		Phone (mob)	
Email address			

Section 2 Project Details

Category	<input type="checkbox"/> Accommodation	<input type="checkbox"/> Vehicle	Project Priority (highest = 1)	
SES Group/Unit				
Project title				

Executive Summary

What is the background behind the project? Are there any specific events/issues? What will the funding be used for? (200 words maximum).

Section 3 Funding Details

Provide all funding details for the project. All costs are to be GST exclusive.

For more information relating to funding, refer to the Project Requirements section of the Funding Guidelines.

Funding Sources	Accommodation \$ (GST Excl.)	Vehicle \$ (GST Excl.)
SES Support Grant funding being sought		
Local Government contribution (i.e., loans, revenue, contribution etc.)		
Other State contributions <i>Provide details below (1)</i>		
Other contributions e.g. insurance payout <i>Provide details below (2)</i>		
Vehicle trade-in price <i>Provide details below (3)</i>		
TOTAL PROJECT COST (GST Exclusive)		

Details (1)	
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Details (2)	
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Details (3)	
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Who will manage and pay for the ongoing operational and maintenance support costs of the project? (100 words maximum):

Funding from other Organisation/Program

Aside from the Funding Details table above, has any financial support for the project been applied for or received from any other Organisation or Government Program? (If **yes**, complete below table)

Yes No

Program/Organisation name	Amount	Conditions

Section 4A Facility Details

Complete this section for Accommodation Subsidies only.

Any attachment/s supporting your application should be referenced below and securely attached with this application. Supporting documentation can include approved building plans, quotes and/or drawings of the proposed accommodation, project timetables including the proposed completion date, copies of valuation certificates etc.

General

What is the project trying to achieve and what are the benefits of the project? Take into consideration the facilities use, current condition, access to other facilities and any other information to support the funding being sought. If the facility will be shared with other non-SES activities, provide details of the percentage of use (200 words maximum).

Building fit-outs

If completing a building fit-out, list the items to be purchased and their approximate costs, below. Attach photographs, plans and quotes to the application where applicable.

Item	Quantity	Cost (Excl. GST)

Section 5 Activity Details

It is recommended that this Section is completed by the relevant Local Controller

History

Has the SES Group/Unit been involved in an emergency or disaster activity in the last 2 years?

Yes No

If **yes**, what was the emergency/disaster and how was the Group involved? (100 words maximum)

What type of emergencies and/or natural disasters is the Area susceptible to? How often do the emergencies/disasters occur and what is the impact on the community (e.g. loss of life, property damage etc.)? (100 words maximum):

Current Activity

Note: Information provided in this section will be verified by Queensland Fire and Emergency Services

How many active members does the SES Group/Unit currently have?

What is the current frequency of training/meetings?

What type of training has been planned for the next 6-12 months?

How is this training relevant to your SES Group/Unit?

Section 6 Terms and Conditions

If a funding application is successful, your organisation agrees to the following SES Support Grant terms and conditions:

1. QFES will provide a funding agreement to the applicant upon formal notification of funding approval. The Applicant will sign the Funding Agreement provided and will be bound by the terms and conditions outlined herein and in the Funding Guidelines.
2. The subsidy will be used solely for the purpose it was given and the project will commence within three (3) months of notification of approval of the project.
3. Where the subsidy will extend over 12 months from the time of approval notification, a written request for an extension will be sought and agreed in writing (refer *Funding Guidelines*, subsection *Variations*).
4. Should Queensland Fire and Emergency Services (QFES) not receive the variation request by 30 April 2018 or a Completion Certificate and supporting documentation by 30 June 2018, the funding for the project will be forfeited.
5. If an extension is requested and approved, the applicant must adhere to the most recent approved *Funding Guidelines* current at the time of finalising the subsidy.
6. Should the applicant undertake the project contrary to what is agreed upon under the program, QFES will cancel approval for funding and any associated funds.
7. The receipt and expenditure of the subsidy will be identified separately within the applicants accounting records so that at all times the subsidy is identifiable and ascertainable.
8. The project, or any component of the project forming part of the application, will not be started before QFES provides a formal notification of subsidy approval. If, for any reason, the project is to be started before the notification, an officer from the organisation will contact QFES before the project starts. The organisation must receive written approval from QFES before proceeding (refer *Funding Guidelines* Section Project Requirements).
9. It is the responsibility of the organisation to ensure adequate insurance cover for the project, excluding the Comprehensive and Compulsory Third Party (CTP) Insurances for dedicated SES vehicles, which is covered by QFES.
10. The organisation will acknowledge the contribution of QFES (refer *Funding Guidelines*, subsection, *Funding Acknowledgement*).
11. All invoices and/or relevant documentation will be submitted in support of the claim for payment of the subsidy (refer *Funding Guidelines*, subsection *Payment of Funds*).
12. Any special conditions that are attached to the subsidy will be met.
13. All relevant records of the subsidy will be kept for a period of seven (7) years, and will be made available for audit at any time.
14. Goods and Services Tax (refer *Funding Guidelines*, subsection *Application of GST*). GST will be payable on the subsidy.
15. Failure to accord with these terms and conditions, *Funding Guidelines* or to comply with the purpose of funding could result in the termination or reimbursement of subsidy (refer *Funding Guidelines*).

Section 7 Applicant Declaration

I have read and agree to the terms and conditions set out in this Application Form and in the *Funding Guidelines* and agree that by signing this document that I will adhere to these terms and conditions. I declare that all information given in this application, including any attachments, is true and correct, and give permission to QFES to contact any persons or organisations in the processing of this application.

I authorise Queensland Fire and Emergency Services to release information in this application (excluding personal information) for non-commercial public information purposes.

I have the duly delegated authority to submit this application on behalf of the Chief Executive Officer and Chief Financial Officer.

Declaration Officer			
Title		First Name	Last Name
Ph		Mobile	Email

By checking this box I hereby agree to the above declaration

APPLICATION CHECKLIST

Prior to submitting your application, please ensure you have completed the following checks:

<input type="checkbox"/>	I have thoroughly read the <i>Funding Guidelines</i> and understand the application requirements.
<input type="checkbox"/>	I have completed all required fields.
<input type="checkbox"/>	The project is yet to be started.
<input type="checkbox"/>	The funding amounts are correct, eligible and GST exclusive.
<input type="checkbox"/>	The Application is supported by the Chief Executive Officer (CEO), or duly authorised delegate.
<input type="checkbox"/>	The Application is supported by the Chief Financial Officer (CFO), or duly authorised delegate.
<input type="checkbox"/>	The Applicant Declaration is complete.
<input type="checkbox"/>	The Application has been lodged in <u>Microsoft Word format</u> via email to QFES.Grants@qfes.qld.gov.au by 30 November 2018 .
<input type="checkbox"/>	Supporting documentation has been clearly identified and attached to the Application.
<input type="checkbox"/>	The application was developed in consultation with the respective Local Controller.

Local Controller

Name

Supported

Yes No

Date

Comments: