

Small Place Activation Grant

Form Preview

Grant conditions

* indicates a required field

About this grant

This program offers grant funding up to \$4,500 from a grant pool of \$20,000, to support and encourage placemaking activities in Nillumbik.

Before applying applicants must talk through their place activation idea with a relevant Council Officer before applying.

Contact Council's Place team via 03 9433 3111 or place@nillumbik.vic.gov.au

Before applying it is essential to have read the Place Activation and Event Grant Program Guidelines *

☐ Yes, I have read the grant guidelines

insert link to guidelines

Place Activation and Event Grant Program Guidelines

Supporting policies and plans

[Council Plan 2021-2025](#)

[Economic Development Strategy 2020-2030](#)

[Health and Wellbeing Plan 2021-2025](#)

[Community Vision - Nillumbik 2040](#)

[Access, Equity and Inclusion Policy](#)

[Child Safety and Wellbeing Policy](#)

[Climate Action Plan 2022-2032](#)

[Community Grants Policy](#)

[Events Policy](#)

Contact details

* indicates a required field

Your name *

First Name

Last Name

Your email *

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Your phone number *

How do you describe your gender? *

- ☐ Female
- ☐ Male
- ☐ Non-binary
- ☐ Prefer not to say
- ☐ Prefer to self describe

Please specify *

Your connection to Nillumbik? *

- ☐ Live
- ☐ Work
- ☐ Volunteer
- ☐ Study
- ☐ Play
- ☐ Other:

Organisation name *

Organisation Name

Organisation type: *

- ☐ Not-for-profit incorporated organisation
- ☐ School (kindergarten to year 12)
- ☐ Unincorporated (auspiced)
- ☐ Individual (auspiced)
- ☐ Commercial business (auspiced)

Unincorporated for profit organisations, local businesses or individuals must partner with an eligible not-for-profit incorporated organisation

Your position *

If applying with an auspice type your role in the community

Organisation address *

Address

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Address Line 1, Suburb/Town, State/Province, and Postcode are required.
If applying as an individual type your address

Organisation email

Partnered not-for-profit incorporated organisation (Auspice) details

Partner (Auspice) name *

Organisation Name

Partner(Auspice) address *

Address

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

Partner (Auspice) email *

Financial Details

Does your incorporated association or auspice have an ABN? *

☐ Yes

☐ No

If your organisation does not have an ABN, you are required to attach a Statement by a Supplier available from the ATO before submitting this application.

ABN of the Incorporated Association or Auspice *

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.

[Download form](#)

Statement by a Supplier *

Attach a file:

Only required if your organisation or auspice do not have an ABN

Primary bank account of the Incorporated Association or Auspice *

Account Name

BSB Number

Account Number

Project overview

* indicates a required field

Project name *

This name will be used to identify and promote the project if successful

Provide a brief description of the project for use in promotional materials if successful *

Word count:

Must be no more than 50 words.

Summarise the project and what will be achieved.

Project start date *

Project end date *

Where will this project or activity be held? *

Include relevant venue information or township

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Provide the name of the Council Officer you spoke to about this project *

If you are unsure of their name, provide detail about the conversation (i.e. spoke at the Information session about event resources)

Assessment criteria - Organisational capacity 10%

* indicates a required field

Provide a detailed description of the project and planned activities *

Describe the specific activities that will take place, including if they will be free or ticketed for attendees

Describe the capacity of your organisation to deliver this project? *

Demonstrate your event management/production capacity, skills and experience to deliver this event. (E.g. what have you done in this space previously, describe strength of your connection and links to target groups)

Assessment criteria - Alignment to Council plans and strategies 10%

* indicates a required field

With the aim to fund events that will have the greatest positive impact in Nillumbik, applicants must demonstrate how their proposed event will align with one or more [Council Plan](#) and [Nillumbik Economic Development Strategy](#) objectives, and [Health and Wellbeing](#) themes.

To which of the following Council Plan Themes and Objectives does your project align? *

☐ Community & Connection - To encourage inclusion and participation to support health and wellbeing and ensure that all our residents have equitable access to services, programs, events and initiatives

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- ☐ Place & Space - To protect, enhance, maintain plan and design places and spaces that strengthen identity, reinforce character, improve accessibility, encourage social connection and enjoyment, support biodiversity and respect the environment
- ☐ Sustainable & Resilient - To manage and adapt to changing circumstances that affect our community to ensure it remains sustainable and resilient, both now and into the future
- ☐ Responsible & Accountable - To facilitate the best possible outcomes for our community by demonstrating strong leadership and working actively to achieve the community's objectives

Select only those that apply

To which of the following Economic Development Strategy objectives does your project align? *

- ☐ Improve economic development practices and programs to assist local businesses
- ☐ Create vibrant activity centres and employment precincts in Eltham and Diamond Creek
- ☐ Facilitate economically and environmentally sustainable use of land within the Shire's green wedge
- ☐ Enhance the visitor economy showcasing natural, recreational and cultural strengths

Select only those that apply

Which of the following Health and Wellbeing priorities does your project seek to address? *

- ☐ Social inclusion and connection
- ☐ Community and climate resilience
- ☐ Gender equality and prevention of family violence
- ☐ Physical activity
- ☐ Food
- ☐ Reducing harm from alcohol, other drugs and gambling

Explain how your project will support the objectives and priorities you selected above? *

Include details about the impacts of the project activities over the period of funding

Assessment criteria - Economic impact, attendance and collaboration 25%

* indicates a required field

How many participants are anticipated? *

What percentage of your vendors and suppliers (both paid and in-kind) will be local to Nillumbik? *

- ☐ Less than 50% ☐ 50% to 75% ☐ 75% to 90% ☐ 100%

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List all organisations or groups involved in the event, as well as their roles and responsibilities and contribution to the project. *

Include financial, in-kind, and other resources contributed, and expected involvement of the Nillumbik tourism or business community

Describe the extent to which this project will encourage direct tourism and economic benefit to Nillumbik? *

Assessment criteria - Increases community participation, particularly through diversity and inclusion 25%

* indicates a required field

Select up to three of the priority groups identified in Council's Access, Equity and Inclusion policy that this project will primarily target *

- ☐ Carers
- ☐ Children and young people
- ☐ Cultural and linguistically diverse people
- ☐ First Nations People
- ☐ LGBTIQA+ communities
- ☐ Gender diverse people
- ☐ Older people
- ☐ People experiencing financial insecurity
- ☐ People who live rurally or are geographically isolated
- ☐ People with a disability, chronic disease and/or mental illness
- ☐ Refugees and people seeking asylum
- ☐ Women and girls
- ☐ Not applicable

No more than 3 choices may be selected.

<https://www.nillumbik.vic.gov.au/Community/Community-development/Community-Toolkit/Access-equity-and-inclusion>

How will this project will increase community participation, particularly through the diversity and inclusion of the priority groups selected above *

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i.e. What specific activities will you do to promote diversity and inclusion across the selected priority groups?

Assessment criteria - Place Activation 20%

* indicates a required field

Why is this project needed? *

Consider the extent of community need and benefit that would be displayed, and/or the level of positive impact on the local community

Select up to three of the following outcomes that best describe how this project will enhance the appeal and functionality of public spaces within Nillumbik to increase community use and social connection *

- ☐ Helps build a friendly and welcoming neighbourhood
- ☐ Improves the physical environment of the local area
- ☐ Supports new activities in a public place
- ☐ Contributes to making our townships vibrant
- ☐ Increases opportunities for social connection
- ☐ Increases the number of community members who feel safe, included and/or welcome to participate in community life
- ☐ Promotes a sense of belonging
- ☐ Is a collaborative community project
- ☐ Strengthens the capacity of the Nillumbik community
- ☐ Supports innovation
- ☐ Other:

At least 1 choice and no more than 3 choices may be selected.

Describe how this project will achieve the selected outcomes *

Assessment criteria - Budget 10%

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* indicates a required field

Total amount requested *

\$

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

Total project cost *

\$

What is the total budgeted cost (dollars) of your project?

Total Co-contribution *

Must be a dollar amount.

Will there be a cost to participants? *

☐ Yes

☐ No

☐ Gold coin donation

Projects without some free component will not be considered

How much will participants be charged? *

\$

Must be a dollar amount.

Which components will be free, or how will they be heavily subsidized? *

Income

Please provide a breakdown of all income sources related to the project. Examples of income should include: amount requested under this grant, other grant funding, organisation funds, expected participation/entry fees to cover expenditure, etc.

- Mark income as **C** (confirmed) or **NC** (not confirmed)

Income	\$	Status
Small Place Activation Grant	\$ <input type="text"/>	<input type="checkbox"/> Confirmed <input type="checkbox"/> Not Confirmed
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>
<input type="text"/>	\$ <input type="text"/>	<input type="checkbox"/>

Expenditure

Identify how you will spend all of the income listed above towards your project.

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- Your budget needs to reflect all the costs associated with the project **excluding GST**
- Include any costs for equipment, services, venue hire or permits based on quotes
- Quotes are required for all items over \$1,000

Expenditure	\$	Income
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	

Budget total

The total income must equal the total expenditure of the project

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

= Income - Expenditure

\$

This number/amount is calculated.
Must be \$0

In-kind contributions

List any support being provided by your organisation or other organisations in-kind here, and give an estimated value for this support. Estimate how much you would have to pay for these goods or services if they were not being provided free of charge. For example, volunteer time could be calculated at a rate of \$25 per hour, or at \$35 per hour for skilled tasks.

Examples of in-kind contributions might include: free use of a venue, administrative support, volunteer time, donated refreshments, or any other donated goods or services.

In-kind contribution	\$ Value
	\$
	\$
	\$
	\$

Total in-kind contribution

\$

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This number/amount is calculated.

If Council cannot provide you with the full funding requested could the event go ahead? *

☐ Yes ☐ No

Partial funding amount required to deliver the project *

\$

Must be a dollar amount.

If the project can proceed with partial funding, which items identified in your budget are a priority? *

Provide details of the minimum items required and what you would change to ensure the project could be delivered

Attachments

* indicates a required field

Required supporting material

Quotes for services or products over \$1,000 are required

Attach a file:

Quotes can be written, scanned images from catalogues or online stores, or screenshots from a website or online shopping cart

Public Liability Insurance Certificate

Attach a file:

You must have public liability insurance to a minimum value of \$10 million on commencement of the event

If you do not hold current Public Liability Insurance:

- Applications may be submitted without current Public Liability Insurance on the condition that if the grant is successful insurance is purchased and a Certificate of Currency is provided
- You should apply through an auspice organisation if your group does not wish to purchase insurance
- Or you may be eligible for coverage under [Councils Community Liability insurance](#) if your event will entirely be held in a Council venue.

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Auspecting organisation letter of support *

Attach a file:

Additional supporting material (if available)

Other supporting materials

Attach a file:

Multiple files can be attached

Privacy statement, declaration and your feedback

* indicates a required field

Privacy statement

Nillumbik Shire Council is collecting your personal information for the purpose of registering and assessing your Grant application.

The information you provide will be used for this purpose or a directly related secondary purpose. This information will only be disclosed to third parties if we are permitted to, required to by law, or if Council uses an external panel to assess the Grant applications.

If you do not provide the requested information or it is only provided in part, we may be unable to accept or consider your application.

You may access the personal information that Council holds about you by contacting Council's Privacy Officer on 9433 3271 or privacy@nillumbik.vic.gov.au

Declaration

I certify that: *

- ☐ I have read and understand the terms and conditions in the Grant Guidelines;
- ☐ I have discussed this project with a Council Officer;
- ☐ All details supplied in this application form and in any attached documents are true and correct to the best of my knowledge;
- ☐ This application has been submitted with the full knowledge and agreement of the management of the community group, organisation or auspice partner;
- ☐ I agree to ensure all necessary approvals and permits are obtained prior to my project or event taking place;
- ☐ I understand that if Nillumbik Shire Council approves a grant, I will be required to accept the conditions of the grant in accordance with Nillumbik Shire Council requirements;
- ☐ I understand that if Nillumbik Shire Council approves a grant, I will be required to submit an acquittal and evaluation to Council post delivery of the project;
- ☐ I understand that Nillumbik Shire Council does not accept any liability or responsibility for the proposal in this application and that it is the responsibility of the applicant or their auspicingsponsor to provide appropriate insurance cover; and,

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☐ I consent to the release of project information in this application for promotional and evaluation purposes relevant to Nillumbik Shire Council.

All of the above must be checked

Authorised Person's Name *

First Name

Last Name

Date of Declaration *

Must be a date.

Feedback

This is the end of the application. We would value your feedback regarding our online grants application process. This information will not in any way be used to assess your application.

Is this the first time you have applied for a grant with Nillumbik Shire Council?

☐ Yes

☐ No

How satisfied are you with our application process?

☐ Very satisfied

☐ Satisfied

☐ Neither satisfied or dissatisfied

☐ Dissatisfied

☐ Very dissatisfied

Do you have any comments about our application process?

E.G. What worked well, or what could be improved?

How did you hear about Council's grant program?

☐ Nillumbik Council website

☐ Council Officer

☐ Social media

☐ Network/Newsletter

☐ Nillumbik News

☐ Local media

☐ Word of mouth

☐ Other: