

# FI12.6 Interest Free Loan Application



December 2017

Corporate and Community Services

Applicant details		
<b>Name of organisation</b>		
<b>Contact person</b>		
<b>Postal address</b>		
<b>Phone</b>	(b/h)	(mob)
<b>Email</b>		
<b>ABN</b>		
<b>If your organisation registered for GST</b>	<input type="checkbox"/> Yes	<input type="checkbox"/> No

Support details		
<b>Have you applied for funding from the Shire previously?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, what year was the application successful? Please attach response		
<b>Has the Shire previously assisted your organisation?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please attach information		
<b>Have you, or are you intending to apply for funding from additional sources?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details under "Project Summary"		
<b>Have you received support from the Sports and Recreation Advisory Committee?</b>	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please attach indication of their support		

Guarantor details	
<b>Name Guarantor One</b>	
<b>Postal address</b>	
<b>Phone</b>	
<b>Signature</b>	

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<b>Guarantor details</b>	
<b>Name Guarantor Two</b>	
<b>Postal address</b>	
<b>Phone</b>	
<b>Signature</b>	

<b>Projected income and expenditure</b>			
<b>Income (GST inclusive) List all sources of income, including the amount of Council Contribution being applied for</b>		<b>Expenditure (GST inclusive): List all expenses for your project and attach supporting documentation such as quotes</b>	
<b>Council Contribution</b>	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
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	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
<b>Total income</b>	\$	<b>Total expenditure</b>	\$

**Application must show at least dollar for dollar funding from applicant or additional grant source.**

## Project summary

Please provide details on what the funding will be utilised for:

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## Bank details

Account name

BSB number

Account number

Account holders signature

## Declaration

I, \_\_\_\_\_ confirm that all of the information contained within this Council Contribution application is true and correct and submit it to the Shire of Augusta Margaret River for consideration.

**Name:**

**Position:**

**Signature:**

**Date:**

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## Attachments required for application

Audited financial accounts to 30 June of the previous financial year

Certificate of Incorporation

Confirmation of support from the Sport and Recreation Advisory Committee

**Note: Applications will not be considered where this information is not provided**