Company name

Description automatically generated

**Hills & Coast Business Grant - 2022**

**Application Form**

**Please read the Guidelines available for this grant prior to completing this application:**

|  |  |
| --- | --- |
| ***Project Applicant*** | |
| Business Name: |  |
| Describe your business (max 50 words): |  |
| ABN: |  |
| Contact Name: |  |
| Phone: |  |
| Email: |  |
| Website: |  |

|  |  |
| --- | --- |
| ***Project Details*** | |
| Short Project Title |  |
| Project Summary  *(max 500 words)* |  |
| Project – Physical Location | Adelaide Hills Council  Alexandrina Council  City of Victor Harbor  Kangaroo Island Council  Mount Barker District Council  Yankalilla District Council |

|  |
| --- |
| ***Project Partners (if applicable)*** |

|  |  |
| --- | --- |
| Partner Organisation |  |
| Name of Contact |  |
| Phone |  |
| Email |  |
| Partner contribution *(max 100 words)* |  |

*NOTE: Add as many tables as you require to list all the organisations which are partnering on the project.*

|  |  |
| --- | --- |
| ***Requested Funding \**** | |
| Requested Funding | $  *NOTE: it is a requirement that any amount granted will be matched dollar for dollar by the applicant and must be a monetary contribution (ie; not in-kind).* |

\* If you are registered for GST, please exclude GST from this figure.

|  |  |
| --- | --- |
| ***Assessment Criteria*** | |
| How will this project improve productivity of your business?  *Describe how this project will improve your productivity (output per unit of input) to support business growth. Provide specific, measurable productivity improvement criteria that you will report against if you’re application is successful (eg: units per hour, employment).* |  |
| What will be the expected impact of this project on your business?  *Describe how this project will impact your business. For example, increased sales, introduction of new product lines, entry into new markets, freeing up time to work on the business rather than in it, etc.* |  |
| Can you deliver the Project?  *Demonstrate your experience and capacity to implement/deliver this project. Describe the timeframes for implementation and for impacts to be realised.* |  |
| Why does this Project need these Funds?  *This Fund is intended to enable projects that really need support – please outline the avenues for funding you have already considered.* |  |
| What council or industry strategies does the project align with?  *Where relevant strategies exist – eg; your council economic development strategy or your industry might have a strategic plan.* |  |
| Please provide the following as attachments:  Current Business Plan  Current Profit & Loss  2-year Financial Forecast | Business Plan attached  Profit & Loss attached  2-year Financial Forecast attached |

|  |
| --- |
| ***Project Budget*** |

|  |  |
| --- | --- |
| ***Project Funding \**** | |
| Funding Sought from this Fund | $ |
| Applicant Cash Contribution | $ |
| Funding from other sources (if any) | $ |
| **TOTAL** | **$** |

|  |  |
| --- | --- |
| ***Project Costs \**** | |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
|  | $ |
| **TOTAL** | **$** |
| *NOTES:*   1. *Please provide quotes as evidence of the project costs.* 2. *Local procurement is strongly preferred but not mandatory.* 3. *The Fund will not cover the applicant or project partners general operating costs.* | |

\* If you are registered for GST, please exclude GST from your figures.

|  |  |
| --- | --- |
| ***Endorsement of Applicant*** | |
| Full Name |  |
| Signature |  |
| Date |  |

**Submit your completed application and supporting documentation by 5:00PM on Wednesday 20th July 2022 to:**

[**info@rdahc.com.au**](mailto:info@rdahc.com.au)

**Late submissions will not be accepted.**