

# COMMUNITY RECREATION AND SPORT FACILITIES PROGRAM

**2017-18 APPLICATION FORM**

**Applications Close Monday 10 April 2017**

<b>Applicant Name</b> (your club, association or organisational name e.g. Adelaide City Council)
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<b>Project Title</b> (provide us with a concise name which we will use to identify your project)
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<input type="checkbox"/> <b>Minor Development Application (\$25,000 to \$200,000)</b> <input type="checkbox"/> <b>Major Development Application (\$200,000 to \$1,000,000)</b> <input type="checkbox"/> The landowner is contributing significant financial resources to the project <input type="checkbox"/> The project has been identified and prioritised through a planning process (e.g. facility feasibility study, master plan or similar document).
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<b>Project Executive Summary</b>
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### CRITICAL INFORMATION CHECKLIST

Declaration signed	<input type="checkbox"/> YES <input type="checkbox"/> NO
Landowner Consent OR, Certificate of Title and Council Support Form	<input type="checkbox"/> YES <input type="checkbox"/> NO
Most recent 12 month Statement of Financial Position	<input type="checkbox"/> YES <input type="checkbox"/> NO
Copy of planning document which justifies/prioritises the need for the project (Required for MAJOR)	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Not applicable
Project Quotes	<input type="checkbox"/> YES <input type="checkbox"/> NO
Evidence of Cash Support	<input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> Not applicable
If obtained, a copy of development approval; OR if lodged, copy of lodgement form; OR if not required, a letter of verification from Local Council	<input type="checkbox"/> YES <input type="checkbox"/> NO
Letters of support for the project from your Peak Body and Local Council – as well as any other relevant bodies	<input type="checkbox"/> YES <input type="checkbox"/> NO

Site Plans (Current Plan, Proposed Plan & Design Rationale)

YES  NO

### Advice Notes

Please ensure that your organisation is eligible to apply. See the Guidelines for eligibility criteria.

If you answer 'NO' to any of the following questions on **this page** you are **INELIGIBLE** to apply, please **do not continue**. If you would like to discuss eligibility criteria or are unsure how to answer a question please contact a Funding Consultant on 1300 714 990 to discuss your application.

As it appears on your Certificate of Incorporation or other legal document or Government Gazette.

1. Legal Name of Organisation:

2. Has your organisation been operating for longer than 12 months

YES  NO

3. Please select which type of organisation you are

- Incorporated association or club  
 Local Council  
 School Council/Board of Management  
 Community based incorporated organisation

Ensure that you have understood the question correctly. If you do NOT hold a Gaming Machine Licence your answer to this question is 'Yes'.

4. Our organisation does NOT hold a Gaming Machine Licence

YES  NO

Attach the most recent 12 month Statement of Financial Position (balance sheet) and / or Statement of Financial Performance (income and Expenditure Statement) either certified (signed by Treasurer) or audited.

5. Most recent financial statement has been included in this application

YES  NO

Projects that commence prior to this date will be considered ineligible for funding.

6. Our project will commence after August 2017

YES  NO

For example, if your Total Project Cost is \$200,000 then you may request up to \$100,000 in ORS funding.

7. Our application is requesting 50% or less of the total project cost

YES  NO

Trails Application (requesting 75% or less of total project cost)

8. Landowner consent has been provided and form is attached to this application

YES

NO

Our organisation is the landowner and Certificate of Title is attached

Please ensure they have been placed at the end of your entire application so they are easily accessible during assessment.

9. Current and proposed site plans are attached to this application

YES  NO

10. Project quotes have been provided

YES

NO

EXAMPLE ONLY

## Advice Notes

To be eligible for Major Facility Development funding, the project must have been identified and prioritised through a planning process (eg feasibility study, master plan or similar document).

Ensure that key information within the plan is highlighted.

Provide the physical address where the project is occurring.

For example:

Adelaide Oval, War Memorial Drive, North Adelaide 5006

Provide a concise summary of what your project involves.

Your answer should describe the steps involved in the project as well as the key elements of the project i.e. what are you building and where will it be located.

Some detail may be discussed, such as overall measurements, design, construction process, finishes/internal fit out etc.

Be careful not to discuss the need for the project or describe your organisations history when answering this question.

These figures should be exactly the same as your answers provided in question/s 44 and 45.

**11. Has the project been identified and prioritised as a result of a planning process?** (e.g. identified in a local council plan, state peak body plan, national body plan, or your organisation's strategic or operational plan)

- Yes, Local Council Plan** (attach a copy)
- Yes, State level organisation** (attach a copy)
- Yes, Own organisation plan** (attach a copy)
- Yes, Other plan** (attach a copy)
- No, has not been prioritised in a plan**

## 12. Facility Address

**Facility Name:**

**Street Address:**

**Suburb/Town:**

**Postcode:**

**13. Please provide a summary of your project (what does it entail)**

**14. Estimated Commencement date:**

## 15. Project Cost Summary

**TOTAL Project Cost**

**Amount requested from ORS** \$

## Advice Notes

All application correspondence will be directed to the person via the email address and postal address provided below.

Ensure this email address is checked daily

Ensure that this is a regularly monitored postal address.

If you are unsure of your ABN, please visit the Australian Business Register at [www.abr.business.gov.au/](http://www.abr.business.gov.au/)

If you are unsure, please call the Australian Taxation Office on 13 72 26

## 16. Name and details of contact person for this application

Title:

First Name:

Last Name:

Position:

Phone Number:

Alternative Phone Number:

Email:

## 17. Postal address

Postal Address:

Suburb/Town:

Postcode

18. If your organisation has an Australian Business Number (ABN) please provide

19. Is your organisation GST registered?

YES

NO

20. Are you affiliated with a peak body? (State or National Association)

YES

NO

## 21. Please fill out the following table relating to the current usage of the facility

Provide a list of all organisations/groups that currently use the facility i.e. Adelaide Soccer Club, Adelaide Hockey Club etc. with numbers filled out in the columns. Ensure that the numbers provided are for the current usage and not anticipated.

Organisation/Group	Sport	Total Membership	Males	Females	Juniors	Seniors	Teams
TOTAL							

### Advice Notes

Please identify the gender and age group/s that will benefit from the proposed project (select all that apply).

The Child Safe Environment Compliance Statement acknowledges that your organisation meets the obligations of the Children's Protection Act 1993.

Further information available at [www.families.sa.gov.au](http://www.families.sa.gov.au).

E.g. W-League, AFL Women's.

If there is any further relevant information relating to the usage of the current facility that you wish to discuss please do so here.

### 22. What age groups will use the facility?

Male  Female

0 – 4  5 - 12  13 – 18  19 – 25  26 – 54  55+

### 23. If the organisation wholly or partly provides services to members or participants under 18 years, does it or its governing body hold a Child Safe Environment Compliance Statement

YES  NO

**Not Applicable** (we do not provide services wholly or partly to members or participants under 18 years)

### 24. Is your facility currently being used by elite athletes?

YES (please provide further details)

NO

### 25. Please provide any further details regarding the usage of your facility

EXAMPLE ONLY

EXAMPLE ONLY

## Advice Notes

*Provide an overview of the reasons why this project is needed.*

*Discussion should be ordered by importance.*

*Feel free to use dot points to highlight key information so that it is easily accessible to the reader.*

*Assume the reader has no prior knowledge of your club/association, facility, and situation.*

*Where applicable, refer and attach photos or other information to support your reason/s.*

## 26. Why is the project needed?

SAMPLE ONLY



EXAMPLE ONLY

## Advice Notes

*As a result of the project how will more participants gain access/ to the facility, and how will usage increase?*

*Provide information on the consultation process. What clubs/associations/organisations were consulted with? Does the proposal meet the needs of all the user groups at the location*

*Plans should be a top down view of the facility (birds-eye).*

*Plans need to be able to be placed side by side during assessment to give the reader a clear understanding of the entire project.*

*A one page document providing rationale for the design is advised to ensure that design elements are explained.*

*Example:*

*State/National/International, Premier League, Regional Tournaments*

*Your answer must conform to the relevant compliance standards for your sport/s (State Body, National Body or International Body).*

*List key risks identified and what design feature you will include in the project to address the risk*

*If more space is required, please attach a separate sheet using the same headings.*

**27. How does the project increase participation at the facility?** (include number estimates and rationale where possible)

**28. Where applicable, provide details on facility consultation you have had with other nearby clubs/teams or groups that use the park/reserve or land?**

**29. Please ensure the following documents are placed at the end of your application** (including all supporting documentation)

- Current Site Plan**
- Proposed Site Plan**
- One page document providing rationale for proposed design**

**30. What level of competition will the facility be able to service upon completion** (e.g. State/National/International, Premier League, Regional Tournaments)?

**31. Have you undertaken a risk assessment for the proposed project?**

- Yes** (complete table below)
- No**
- Not applicable for this project**

KEY identified risks	How will proposed project address risk

## Advice Notes

*Expand upon the points outlined in the risk assessment above.*

*Please note: priority may be given to projects that have obtained all development permits/approvals required to commence the project.*

*If there is any further relevant information relating to how the project will be successfully delivered please do so here.*

<b>32. How does the project improve safety at the facility</b>	
<b>33. Does this project address universal access and design principles?</b>	
<b>34. Do you have Development Approval for your project from Local Council?</b> <input type="checkbox"/> <b>Yes – received</b> (attach a copy of approval) <input type="checkbox"/> <b>No – lodged and awaiting decision</b> (attach of copy of lodgement form) <input type="checkbox"/> <b>No – required, but not yet lodged</b> <input type="checkbox"/> <b>No – Not required</b> (attach a letter of verification from Local Council)	
<b>35. Who will be managing the project?</b> <input checked="" type="checkbox"/> <b>Our organisation will manage the project</b> <input type="checkbox"/> <b>Our local council will manage the project</b> (provide details below) <input type="checkbox"/> <b>Other</b> (provide details below)	
<b>Contact person</b>	
<b>Name of organisation</b>	
<b>Position/Title</b>	
<b>Phone number</b>	
<b>36. Please provide any additional information regarding how your project will be delivered.</b>	

**Advice Notes**

Please seek advice if you are unsure. Answer should be in years.

In dollars (\$).

This could also be shown as a line of budget if only one bank account is used.

Type of maintenance (painting, plumbing, surface repairs)  
Does it cover complete or partial replacement at end of facility lifetime?

If there is any further relevant information relating to how the project will be effectively maintained please do so here.

**37. What is the estimated lifetime for the proposed facility?**

**38. What do you expect will be the annual maintenance cost for the facility?**

**39. Do you have a separate fund dedicated to the maintenance and replacement of the facility?**

- Maintenance only                       Maintenance and replacement  
 Replacement                               No dedicated fund

**40. What elements does this fund cover?**

**41. Any additional information regarding how your facility will be maintained**

**42. Please fill out the following table relating to support for your project**

- Please use the forms found at the end of this document for Local Council support and Peak Body support.
- Note that a letter of support must be attached to this application for every organisation listed below.

	Name of Organisation/Group	Full Name	Position/Title
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			
11.			
12.			

13.			
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**43. Using the headings in the table below, outline any In-kind support being contributed for your project**

- Please note that successful applicants may be required to provide a detailed breakdown of in-kind support at the completion of their project.*

In-kind support	Amount	Evidenced
Total donated materials		<input type="checkbox"/>
Total in-kind labour (professional)		<input type="checkbox"/>
Total in-kind labour (non-professional)		<input type="checkbox"/>
Other		<input type="checkbox"/>
Other		<input type="checkbox"/>
Other		<input type="checkbox"/>
<b>TOTAL IN-KIND SUPPORT</b>		

EXAMPLE ONLY



45. Using the headings in the table below, provide details of how your organisation will fund the project

**Advice Notes**

- Do not include cents – round up to the next dollar
- If your organisation is GST registered costs are to be GST exclusive.
- If your organisation is not GST registered cost are to be GST inclusive
- **Only projects where the request for funding from the Office for Recreation and Sport is equal to or less than 50 per cent of the total project cost (with the exclusion of recreational trails projects) will be funded**

**PROJECT FUNDING**

Source	Amount	Evidenced
How much Office for Recreation and Sport funding are you requested? (minimum \$25,000)		<input type="checkbox"/>
Funds at bank		<input type="checkbox"/>
Loan/s		<input type="checkbox"/>
Other State Government Funding		<input type="checkbox"/>
Federal Government Funding		<input type="checkbox"/>
Local Government Funding / Landowner Funding		<input type="checkbox"/>
Other		<input type="checkbox"/>
		<input type="checkbox"/>
<b>TOTAL FUNDING</b>		

EXAMPLE ONLY

# APPLICANT DECLARATION

## Final checklist before submitting your application

- We have completed all relevant sections of this application form.
- We have attached all supporting material requested in this application form

## Instructions:

1. The declaration below must be read and signed by two authorised representatives of your organisation.
2. At least one representative must be a member of the Board / Management Committee.

## Declaration by authorised persons

I make the following declaration:

1. I am duly authorised by the organisation to prepare and submit this application.
2. This organisation is eligible to apply for funding in accordance with the eligibility criteria in the Funding Guidelines.
3. The responses in this application and all supporting documents provided are to the best of my knowledge true and correct.
4. I understand that the Office for Recreation and Sport may disclose the information provided in this application to other Government agencies, Local Government, reviewers and staff assisting with the administration or promotion of State Government Grant Schemes.
5. The project will not benefit any organisation that holds a Gaming Machine License issued under the Gaming Machines Act, 1992.
6. Where required our project will comply with all legislation including, but not limited to, the *Disability Discrimination Act* and the *Children's Protection Act 1993*.
7. I understand that information contained within this application may be made public. Please refer to the program guidelines for more information.

<b>Signature 1:</b>		<b>Signature 2:</b>	
<b>Date:</b>		<b>Date:</b>	
<b>Name:</b>		<b>Name:</b>	
<b>Position:</b>		<b>Position:</b>	

## Please forward this completed application and all attachments to:

### BY POST:

Applications post marked on or before the closing time and date will be accepted.

Community Recreation and Sport Facilities Program  
Office for Recreation and Sport  
PO Box 219  
BROOKLYN PARK SA 5032

### IN PERSON:

Hand delivered applications must be received by 5.00pm  
Monday 10 April 2017

Community Recreation and Sport Facilities Program  
Office for Recreation and Sport  
27 Valetta Road  
KIDMAN PARK SA 5025

**LATE APPLICATIONS MAY NOT BE ELIGIBLE FOR FUNDING CONSIDERATION**

**Applications close Monday 10 April 2017**

Telephone: 1300 714 990

Web: [www.ors.sa.gov.au](http://www.ors.sa.gov.au)



# ATTACHMENTS

INFORMATION TO BE SUBMITTED AS AN ATTACHMENT AND ORDER		
Order	Page Heading	Description
<b>1 FIRST</b>	Landowner Consent or Certificate of Title	Landowner Consent or Certificate of Title
<b>2</b>	Financial Statements	Attach the most recent 12 month Statement of Financial Position (balance sheet) and / or Statement of Financial Performance (income and Expenditure Statement) either certified (signed by Treasurer) or audited.
<b>3</b>	Strategic Planning Document	Where applicable, a copy of the planning document which justifies/prioritises the need for the project
<b>4</b>	Project Quotes	Where applicable, project quote/s
<b>5</b>	Evidence of Cash Support	Where applicable, evidence of cash support
<b>6</b>	Development Approval Status	If obtained, a copy of development approval; OR if lodged, copy of lodgement form; OR if not required, a letter of verification from Local Council
<b>7</b>	Support <ul style="list-style-type: none"> <li>• Council Support Form</li> <li>• Peak Body Support Form</li> </ul>	Letters of support for the project from each of the user groups. (please ensure that Local Council and Peak Body are placed at the top)
<b>8</b>	Additional Documents (use appropriate heading i.e. Photos, Risk Assessment etc.)	Any additional documentation (e.g. photos, additional planning documents, risk assessment etc.)
<b>9 LAST</b>	Site Plans <ul style="list-style-type: none"> <li>• Current Plan</li> <li>• Proposed Plan</li> <li>• Rationale</li> </ul>	A copy of building works drawings or concept plans for the project.



## LANDOWNER CONSENT FORM

<b>In relation to the grant application from:</b> <i>(name of applicant)</i>	
<b>For the following project:</b> <i>(project name)</i>	
<b>To be undertaken at:</b> <i>(facility address)</i>	
<b>The property is owned by:</b>	
<b>Land Title Status</b> <i>(only to be completed where land owner is the Council)</i>	<input type="checkbox"/> Operational <input type="checkbox"/> Community

The applicant's arrangement with the landowner is:

Leaseholder Expiry date of lease:

Seasonal Permit Holder (re-negotiated annually)

Permanent Seasonal Permit Holder Expiry date of permit:

As landowner, we give consent for the project and in addition we will be providing the following support:

Other than consent, no other support is provided

Financial Support Amount: \$

Are there any conditions attached to this support? (please list e.g. funding is subject to following years budget being approved etc)

As landowner we have the following requirements for any work undertaken (please list e.g. only licensed tradespersons will be permitted to undertake work on this site, owner will project manage works undertaken, etc)

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**Authorisation**

I am authorised to complete this document on behalf of the landowner

**Signed:**

**Name of signatory:**

**Position held:**

**Contact Number:**

**Phone (wk):**

**(mb):**

**Other comments** (e.g. the project has been identified by the owner as a high priority )

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EXAMPLE ONLY



# COUNCIL SUPPORT FORM

This form is only required if the Local Council is **NOT** the landowner

<b>In relation to the grant application from:</b> <i>(name of applicant)</i>	
<b>For the following project:</b> <i>(project name)</i>	
<b>To be undertaken at:</b> <i>(facility address)</i>	

**As the applicant organisation's Council; are you providing either of the following?**

**Financial Support**

**Amount:** \$

**Are there any conditions attached to this support?** (please list e.g. funding is subject to following years budget being approved etc)

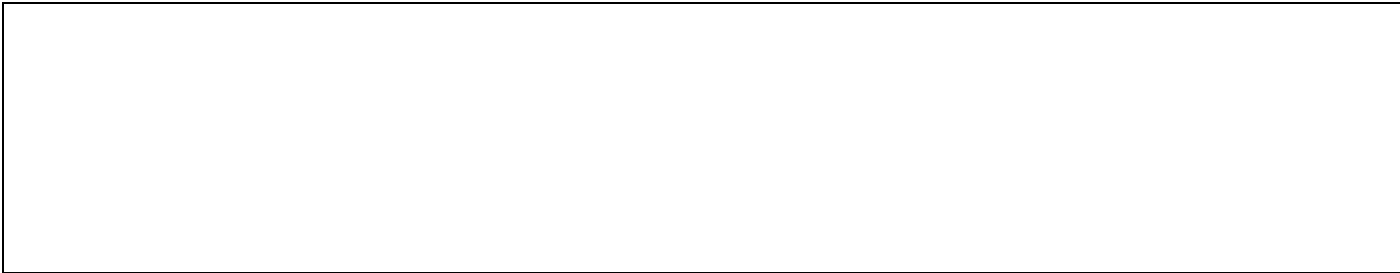
**Authorisation**

I am authorised to complete this document on behalf of the Council

<b>Signed:</b>			
<b>Name of signatory:</b>			
<b>Position held:</b>			
<b>Council:</b>			
<b>Contact Number:</b>	<b>Phone (wk):</b>		<b>(mb):</b>

**Other comments** (e.g. the project has been identified by the owner as a high priority )

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EXAMPLE ONLY



# PEAK SPORTING BODY SUPPORT FORM

This document is not considered essential, however it is recommended you communicate with your Peak Sporting Body about your project.

<b>In relation to the grant application from:</b> <i>(name of applicant)</i>	
<b>For the following project:</b> <i>(project name)</i>	
<b>To be undertaken at:</b> <i>(facility address)</i>	

**As the applicant organisation's Peak Body; are you providing either of the following?**

**Financial Support**

**Amount: \$**

**Are there any conditions attached to this support?** (please list e.g. funding is subject to following years budget being approved etc)

**Authorisation**

I am authorised to complete this document on behalf of the Peak Body

<b>Signed:</b>				
<b>Name of signatory:</b>				
<b>Position held:</b>				
<b>Peak Body:</b>				
<b>Contact Number:</b>	<b>Phone (wk):</b>		<b>(mb):</b>	

**Other comments** (e.g. the project has been identified by the owner as a high priority )

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EXAMPLE ONLY