

1. Application Form - CG

Form Preview

Foreword

* indicates a required field

Please note that incomplete applications cannot be accepted. Ensure all required questions have been answered and all required attachments have been uploaded before the round closes.

Would you like feedback after submission?

- You can request general feedback on your application from the Grants Team.
- This service is available until two weeks before the closing date, we encourage you to submit early.

If you have any questions or would like a hand along the way, please reach out - the Grants Team is here to help!

*Call on **1300 79 49 29** or email **grants@frasercoast.qld.gov.au** and quote this number below...*

Application Number

This field is read only.

No entry required (system generated)

Program

This field is read only.

No entry required (system generated)

Have you read and understood the current Community Grants guidelines? *

☐ Yes → Proceed

☐ No → Access Guidelines

Taking the time to read them will help you submit a strong application. Access the guidelines [here](#).

It looks like you are not eligible for this grant program...

Based on your response, you have not met the eligibility requirements and cannot proceed with an application at this time. We encourage you to review the grant guidelines or contact the Grants Team if you have any questions.

If this application is no longer required, please delete it from your Submissions page.

Applicant Eligibility

* indicates a required field

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This section of the application form is designed to help you (and us) understand if you are eligible for this grant.

- Use **Save Progress** button regularly to ensure your information is not lost - sessions do time-out.
- If you are applying through an auspice, the answers provided must relate to the auspice organisation.

Organisation Status

Are you an incorporated not-for-profit or P&C Association or registered charity? *

☐ Yes →
Proceed

☐ No →
Auspiced

☐ No →
Ineligible

If you are a community organisation that is not an Incorporated association, P & C Association or Registered with the Australian Charities and Not-for-profits Commission your application will need to be auspiced. For further information regarding auspicing, click [here](#). To progress further, please consult with an eligible incorporated body to make application on your behalf.

Governance Approval

Has your management committee formally approved this application? *

☐ Yes → Proceed

☐ No → Ineligible

Outstanding Compliance

Do you have any unacquitted council grants OR outstanding council debts? *

☐ No → Proceed

☐ Yes → Ineligible

Funding Limits

You are eligible to apply in both community grant funding rounds. If you were successful in a previous round of this financial year:

- subtract the amount previously awarded from -
- the maximum annual funding limit of \$5,000 =
- you may apply for the remaining balance.

Have you already received a total of \$5,000 funding from Community Grants in this financial year? *

☐ No → Proceed

☐ Yes → Ineligible

Gaming and Liquor Licence Status

Do you hold a Gaming licence? *

☐ No → Proceed

☐ Yes → Ineligible

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Do you hold a liquor licence type: Community - Other? *

☐ Yes → Proceed

☐ No → Go to Next Question

Do you hold a liquor licence type: Permit for a One-off Event? *

☐ Yes → Proceed

☐ No → Go to Next Question

Do you hold any liquor licence (other than a Community - Other Licence or a Permit for a One-off Event)? *

☐ No → Proceed

☐ Yes → Ineligible

Organisations who hold Community - Other or Permit for a One-off Event licences are eligible. All other licence types are ineligible (this applies to Community Club Licences).

Financial Solvency

Is your organisation financially solvent? *

☐ Yes → Proceed

☐ No → Ineligible

Solvency is the ability of an organisation to meet its long-term financial obligations. Newly established organisations that have not yet reported financial information to a relevant authority are encouraged to contact the Grants Team to discuss your application.

Insurance

Confirm you hold Public liability insurance (to the value of \$20 million) *

☐ Yes → Proceed

☐ No → Ineligible

You must be able to produce insurance certificates of currency that cover the project periods

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Based on your response, you have not met the eligibility requirements and cannot proceed with an application at this time. We encourage you to review the grant guidelines or contact the Grants Team if you have any questions.

If this application is no longer required, please delete it from your Submissions page.

Project Eligibility

* indicates a required field

This section of the application form is designed to help you (and us) understand if your project is eligible for this grant.

- Use **Save Progress** button regularly to ensure your information is not lost - sessions do time-out.

Location Requirement

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Is the project fully delivered in the Fraser Coast region? *

☐ Yes → Proceed

☐ No → Ineligible

Project Timing

Eligible Project Windows

Round 1: 02 Nov 2026 - 01 May 2027 & **Round 2:** 01 Apr 2027 - 01 Oct 2027

Has your project already started or been completed? *

☐ No → Proceed

☐ Yes → Ineligible

Do your project dates fall within the eligible round window? *

☐ Yes → Proceed

☐ No → Ineligible

Previous Support of Project

Has your proposed project previously been funded by FCRC within the past 5 years? *

☐ No → Proceed

☐ Yes → Ineligible

Where your project is an event: it may be eligible to apply for FCRC Major Regional Events Sponsorship - to check your eligibility contact the Senior Regional Coordinator on 1300 79 49 29 to discuss.

External Beneficiaries

Is your project a fundraising event or for a donation/sponsorship benefiting other groups? *

☐ No → Proceed

☐ Yes → Ineligible

Financial Sustainability

Will your project create ongoing costs that cannot be met by your organisation? *

☐ No → Proceed

☐ Yes → Ineligible

Will your project create an ongoing financial or in-kind commitment for Council? *

☐ No → Proceed

☐ Yes → Ineligible

Ineligible Costs

Ineligible costs are listed in the guidelines; they include but are not limited to the following items:

- Expenses related to core business or operations
- Wages
- Catering and food
- Consumables or disposable items that are used up during the project and do not provide an ongoing benefit beyond the funded activity
- Alcohol
- Gifts or prizes in the form of cash, gift cards or goods & services

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- Grant writing fees
- Project management fees
- Overseas travel costs
- Repayment of debts or loans
- Payment of standard utilities

Are you requesting funding for any ineligible cost as part of your project? * ☐ No → Proceed ☐ Yes → Ineligible

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Based on your response, you have not met the eligibility requirements and cannot proceed with an application at this time. We encourage you to review the grant guidelines or contact the Grants Team if you have any questions.

If this application is no longer required, please delete it from your Submissions page.

Eligibility Evidence

* indicates a required field

In this section, you will upload the supporting documents required to confirm your eligibility and support your application.

Applications that do not include all mandatory documents may not be assessed.

If you are applying through an auspice, the documents provided must relate to the auspice organisation.

Legal Status Evidence

For incorporated bodies; enter your Incorporated Number here:

to look up your IA number go to www.qld.gov.au/law

Can you provide a copy/evidence of Certificate of Incorporation, ACNC Registration Extract, or other evidence of your legal status? *

☐ Yes →
Upload file
below

☐ No → Upload
explanation
note below

☐ No →
Application
Incomplete

Upload your Certificate here: *

Attach a file:

A minimum of 1 file must be attached.

Governance Approval

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Has your management committee formally approved this application? *

☐ Yes → Upload Management Endorsement Letter below

☐ No → Application Incomplete

Click [here](#) for template of Management Endorsement letter.

Upload Governance Approval Letter: *

Attach a file:

A minimum of 1 file must be attached.

Financial Viability

Accepted evidence your organisation is financially solvent

- Your Latest Audited Financial Statement, OR
- Balance Sheet (Asset and Liability Statement - as provided to Office of Fair Trading)

Can you provide one (1 only) of the above, as evidence your organisation is solvent? *

☐ Yes → Upload your Certificate of Currency below

☐ No → Application Incomplete

Upload your Audited Statement OR Balance Sheet here: *

Attach a file:

A minimum of 1 file must be attached.

Bank Account Verification: Upload your Bank Statement Header here: *

Attach a file:

1 file must be attached.

Must be dated within 3 months & include your organisation's name, BSB and Account Number. This document is used to verify your banking details. If you are being Auspiced use your supporting organisation's bank header.

Public Liability Insurance Certificate of Currency

Provide evidence your organisation has Public Liability Insurance. Certificate of currency must cover the dates of your project.

Upload a copy of your Certificate of Currency here: *

Attach a file:

Liquor Licence Certificate

Provide evidence of your organisation's current Liquor Licencing Certificate, must show the type of licence held.

Upload a copy of your Certificate here: *

Attach a file:

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Asset / Land Compliance (if applicable)

Where the project involves works on land or buildings, do you have legal authority to undertake the proposed works? *

- ☐ Not Applicable → Proceed
☐ Yes, I am the land owner → Proceed
☐ Yes → Upload your Written landowner permission below

Council leased - Click [here](#) to access FCRC Standard request for landlord approval form for works on leased properties. Begin your application early as it can take 6 weeks to receive a reply.

Upload your written landowner's permission document here: *

Attach a file:

A minimum of 1 file must be attached.

Project Event Permit (If applicable)

Where your project is an event, and being held within a Council operated space - Do you hold a FCRC Event Permit?

- ☐ Not Applicable → Proceed
☐ No → Incomplete Application
☐ Yes → Enter your permit number below

For further information regarding Event permits click [here](#)

Provide your event application number: *

Applicant Details

* indicates a required field

Applicant Details

DO NOT use capitals when completing this form.

Ensure you

- do not select individual unless you have arranged for support from an auspice organisation.*
- have checked your spelling as this information is used to populate legal documents and cannot be edited.*
- provide an organisation name that matches your ABN*

Applicant Organisation *

☐ Individual ☐ Organisation
Organisation Name

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First Name

Last Name

Applicant primary address

Address

Applicant postal address

Address

Applicant primary phone number *

Must be an Australian phone number.

Applicant email address *

Must be an email address.

Applicant website

Must be a URL.

Applicant ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Applicant Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

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Project Contact Details

Project Contact *

First Name

Last Name

Project Contact Position *

Project Contact Phone Number *

Must be an Australian phone number.

Project Contact Email *

Must be an email address.

Auspice Information

*** indicates a required field**

Auspice Support

Unincorporated organisations or individuals applying for a grant must be auspiced by an incorporated organisation who agrees to take administrative, financial and legal responsibility for this grant application. Further information available [here](#)

Have you gained support from an incorporated body to auspice your application? *

☐ Yes → Upload file below

☐ No → Ineligible

Upload your Auspice Authorisation and Agreement here: *

Attach a file:

A minimum of 1 file must be attached.

A letter from the Auspice Organisation confirming that the auspice arrangement is valid and current. And, outlines their support for the lodgement of this application. The letter must be signed by 2 (two) authorised persons (Executive Members) and must include: name, position, signature and date.

Auspice Organisation Details

Auspice organisation name *

Organisation Name

Please use the organisation's full name - Must match ABN Name.

Primary contact person at auspice organisation *

Organisation Name

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We may contact this person to verify that the auspice arrangement is valid and current.

Position held in organisation *

e.g., Manager, Board Member or Fundraising Coordinator.

Auspice IA Number *

to look up your IA number go to www.qld.gov.au/law

Upload a copy of your Incorporated Certificate *

Attach a file:

Auspice ABN *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Must be an ABN.

Auspice Primary Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Auspice Contact Information

Auspice primary address

Address

Auspice primary phone number *

Must be an Australian phone number.

Auspice postal address

Address

Auspice email address *

Must be an email address.

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Auspice website

Must be a URL.

It looks like you are not eligible for this grant program...

Based on your response, you have not met the eligibility requirements and cannot proceed with an application at this time. We encourage you to review the grant guidelines or contact the Grants Team if you have any questions.

Where this application is no longer required please delete from your submissions page.

Project Details

* indicates a required field

Project Title

Provide a name for your project - your title should be short but descriptive and suitable for media use: *

Must be no more than 250 characters no more than 15 words.

Project Statement

This statement is for identification purposes - it will not contribute to the merit of your application and should be suitable for media use. Be descriptive, but succinct.

Create a one/two sentence summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what effects you expect to result from your activities (outcomes).

Provide your project statement *

Word count:

Must be between 15 and 50 words.

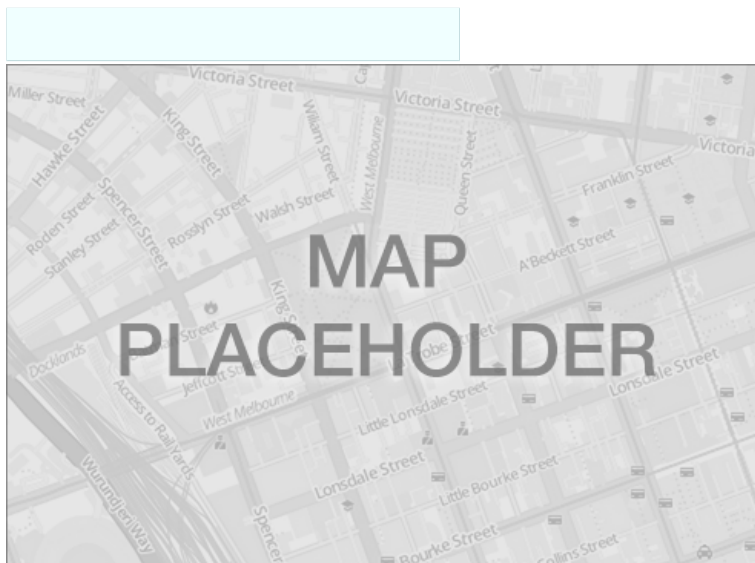
Project Location

Project Location Address *

Address

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Start typing the address to auto populate your address

Project Dates

Start

Anticipated start date *

Must be a date and between 2/11/2026 and 1/5/2027.

End

Anticipated end date *

Must be a date and between 2/11/2026 and 1/5/2027.

Project Alignment to Selection Criteria

* indicates a required field

Community Benefit

Think about the outcomes you are aiming for:

- What are the specific community needs or priorities your project addresses.
- Who will benefit from your project.
- How many people are expected to participate in or benefit from your project.
- How was the need identified.
- How the project will create lasting benefits beyond the funding period.

Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Describe how your project will provide a measurable positive benefit for the Fraser Coast community: *

Word count:

Must be no more than 250 words.

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Strategic Alignment

The FCRC corporate plan outlines our objectives of

- 1.Connected, Inclusive Communities and Spaces
- 2.Resilient and Environmentally Responsible Region
- 3.Focused Service and Infrastructure Delivery
- 4.Focused Organisation and Leadership
- 5.Engaged and Agile Volunteers

Think about how your initiative will support FCRC achieve our goals. What are the expected social, cultural, environmental, health or economic outcomes.

Identify the areas of our corporate plan your project aligns with, and describe how your project will contribute to the selected priority area(s)? *

Word count:
Must be no more than 250 words.

Project Delivery

Outline the activities required to complete your project, identify the major milestones (and their associated risks) that will demonstrate progress and successful delivery:

Milestone	Start Date	End Date	Identified Risks
One per row. Must be no more than 15 words.	Leave blank if unknown or not relevant.		Please add more stages if required. Must be no more than 25 words.

If you have completed a full Project Plan upload your document here:

Attach a file:

Applicant Capacity

Describe your organisation's ability and resources to undertake the work you propose and detail any previous experience delivering similar projects. *

Partnerships and Collaboration

Evidence of community support is generally highly regarded as projects with community buy-in tend to be more successful.

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Do the beneficiaries of this project support the activities you are proposing? *

☐ Yes

☐ No

☐ Unknown

Describe how you are collaborating with other community groups to deliver your project and provide any evidence you have gathered that this project has community support: *

If it is not possible to collaborate with other groups, please provide an explanation. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

Please upload your evidence of support (ie. surveys, petitions, letters of support from community) if available/ relevant

Attach a file:

A maximum of 1 file can be attached - please combine into one document if you have various types of evidence.

Project Alignment to Selection Criteria - Budget

* indicates a required field

Using the questions and tables below complete a detailed and accurate project budget, which is evidenced by quotes, to provide a clear understanding of value for grant monies. You must list eligible expenditure items and demonstrate your contribution and any other income sources that apply to the project.

Is your organisation registered for GST? ☐ Yes

☐ No

Amount Requested & Expenditure amounts used in the calculations for your budget must **exclude** the GST component - Use the Government's [GST Calculator](#) to help identify GST components.

Amounts used in the calculations of your budget should be **inclusive** of GST

Minimum funding amount is \$1,000 - maximum funding amount is \$5,000 per financial year.

Total Amount Requested *

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

Total Project Value

This number/amount is calculated. Total budgeted cost (dollars) of your project.

Your Financial Contribution

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Are you making a financial contribution to the project? ☐ Yes → Identify this amount in your Income budget below ☐ No

Have you sought funding for this project from FCRC or any other funding sources for this project? ☐ Yes → Identify the provider and the amount in your Income budget below ☐ No

Provide supporting information regarding other funding sources:

1. When did you request the funding? 2. Is your request successful? 3. If applicable, what is the reason for requesting additional funding?

YOUR BUDGET MUST BALANCE (Total Income Amount = Total Expenditure Amount)

Project Budget - Income

Please list all financial contributions to the project.

- Clearly describe each income item.
 - Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'.
- Identify other funding that you have applied for, whether it has been confirmed or not.
- Do not delete the first row it is mandatory and should match the Total Amount Requested above
- Do not include cents in your amounts.
- Remove any unwanted rows with + / -
- Make changes to the text by typing over the description or deleting it.

Income description	Is this funding confirmed?	Income amount \$
		(No cents)
Amount Requested from FCRC Community Grant	Confirmed Unconfirmed	
Your Funds (enter zero in amount if there is nil contribution)	Confirmed Unconfirmed	
Ticket Sales (for ticketed events only - remove this row if not applicable)	Confirmed Unconfirmed	

Project Budget - Expenditure

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Please list the items required for your project (both grant funded and not grant funded), and the cost of each item.

For grant funded items, quotes will need to be attached via file uploads below

- We require two quotes.
- We can accept screenshots from websites. (Do not include freight costs - this is an ineligible expenditure.)
- Where a quote is not possible upload an explanation of your attempts.
- Provide an explanation of the quotes if the items in each quote are not directly comparable (not like-for-like).

Expenditure description	Local Supplier	Request to Fund this item?	Expenditure amount \$
Clearly describe each expenditure item in your entire project			
Item 1 -		Grant Funded Part Grant Funded No	

Attach your quotes for grant-funded items

Quotes are only for grant funded items

Description (must match a Preferred Quote Upload above)	Preferred Quote Upload	2nd Quote Upload
	A minimum of 1 file must be attached.	A minimum of 1 file must be attached.
Item 1 -		

Local Supplier Explanation

Where grant fund expenditure is not from a Local Supplier, please provide an explanation:

Quote Explanation

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Where there are minor or major variations between quoted items and one item is preferred over another, please identify the preferred item and provide the context and reasoning for your preference.

In-Kind Contributions

List the In-Kind support will you provide to this project:

In-kind labour is valued at \$46.62 per hour

Description	# of Volunteers	Labour (# of Hours)	Total In-Kind Value \$
Labour supplied for/ to do:	Must be a number.	Must be a number.	This number/amount is calculated.

Budget Totals

Total Income Amount

This number/amount is calculated.

Total Expenditure Amount

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.

Project Flexibility

Community Grant rounds are generally heavily subscribed, when this occurs assessors may deem to part-fund projects to get greater community benefit.

Will the project proceed if only partial funding is allocated? *

- ☐ Yes
☐ No

How would the scope of the project change if awarded partial funding? *

Word count:

Must be no more than 250 words.

Certification and Feedback

* indicates a required field

Commitment to Funding Acknowledgement

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We encourage you to think beyond traditional recognition methods and consider creative ways to acknowledge Fraser Coast Regional Council's contribution to your project and our shared commitment to building a better community together.

If your application is successful, how will your organisation acknowledge Fraser Coast Regional Council's support for this project?

☐ Social media ☐ Website ☐ Speeches ☐ Flyers ☐ Banners ☐ Signs/Plaques Other

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

I certify that

- I am authorised by my organisation to authorise this form
- to the best of my knowledge the statements made within this application are true and correct

I certify I understand that if the applicant organisation is approved for this grant

- we will be required to accept the terms and conditions of the grant as outlined in the funding agreement
- that council does not accept any liability or responsibility for the project
- all necessary permits/approvals will be obtained prior to the beginning of the project
- the project will be covered by appropriate insurance
- all relevant health and safety standards will be met
- funds are claimed within 30 days of notification, except where there is a co-funding requirement
- we will provide proof of successful co-funding (other grant sources) within six months of notification
- we will complete the project within six months of receiving council funding
- we will ensure that acquittal requirements are met

I agree *

☐ Yes

Name of authorised person *

First Name

Last Name

Must be a senior staff member, trustee or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Phone number *

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

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Email *

Must be an email address.

Checklist

Important

Once your application has been submitted:

- You cannot edit your application
- You cannot upload additional documents

The next page will take you to Check and Confirm, so make sure you have:

- Completed all mandatory questions
- Uploaded all required supporting documents
- Reviewed your responses for accuracy and completeness
- Submitted your application before the closing date and time

After Submission

A confirmation email and a copy of your application will be sent to the email address linked to your SmartyGrants account.

If you do not receive a confirmation email, please check your junk or spam folder. If it is still missing, contact the Grants Team as your application may not have been successfully submitted.

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process.

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60