1. Regional Economic Development (RED) Grants Program

* indicates a required field

1.1 Application Information

Before completing this application form please ensure you have read the RED Grants Program Guidelines available online here.

All applicants are encouraged to discuss their project with the Pilbara Development Commission prior to submitting an application.

Incomplete applications and/or applications received after the closing date will not be considered.

If you have any questions, or experience issues completing this form please contact the Pilbara Development Commission on **9173 8401** or email **grants@pdc.wa.gov.au**.

1.2 Eligibility Confirmation

Please refer to Section 4 of the Guidelines to confirm your eligibility before completing this application.

I confirm the Applicant:

- Has read and understood the program Guidelines
- Is eligible to apply under the Guidelines
- Is able to demonstrate the financial viability of the organisation
- Is able to demonstrate alignment with at least one of the objectives of the RED Grants Program

Please confirm that all statements above are true and correct. *

Yes I confirm

1.3 Privacy Statement

Information provided by applicants or collected by Regional Development Commissions (RDCs) or the Department of Primary Industries and Regional Development (DPIRD) in relation to an applicant or their application may be used in the administration of the RED Grants Program and in the assessment of this application.

Clarification of other funding sources for your project as stated in your application and project budget may be sought from the relevant funding bodies.

Any information provided (personal, financial or otherwise) will be used solely for the purpose of the RED Grants Program.

RDCs and DPIRD will store personal information collected in this application, supporting documentation and any grant administration, monitoring and evaluation activities in compliance with its obligations under the *Privacy Act 1988* (cth).

RDCs and DPIRD are also subject to the *Freedom of Information Act 1992* and documents in the possession of these agencies are subject to these provisions.

I have read and un	derstood the privacy	statement and I	consent to and	authorise
such uses and disc	losures. *			
Yes I confirm				

2. Contact Details

* indicates a required field

2.1 Organisation Details

Name of Organisation (Legal Entity) *
Organisation Name

Applicant organisation 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.

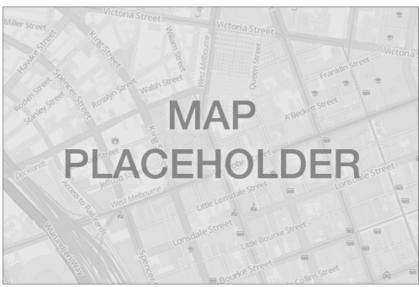
Information from the Australian Busi	ness Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Tra	h	in	a	N	a	m	e

Name that will be referred to for the delivery of the project (if different to Legal Entity Name above)

Primary Street Address * Address	



Vord count: Just be no more than 300 words.		
Provide a brief description of t nformation that describes the		
lust be a URL.		
Organisation Website		

Upload Trust Deed * Attach a file:
Trustees MUST submit a copy of their executed Trust Deed to be eligible.
2.2 Project Contact Details
Contact Person's Name * Title First Name Last Name
Contact Person's Position *
Contact Person's Phone Number *
Must be an Australian phone number. Include area code Eg (08)
Contact Person's Mobile Number
Must be an Australian phone number.
Contact Person's Email Address *
Contact Ferson's Linear Address
Must be an email address.
Is your organisation being Auspiced? *
Yes No If your organisation is unincorporated your application must be auspiced by another organisation that is registered as a legal entity.
2.3 Complete only if your organisation is being Auspiced
Please ensure approval is obtained from the nominated auspice organisation prior to completing this section.
Name of Auspicing Organisation * Organisation Name
Organisation name
Auspice Organisation's Postal Address *
Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Auspice Organisation's Website
Must be a URL.
Must be a Ort.
Auspicing Organisation's Contact Person *
Title First Name Last Name
Auspicing Organisation's Contact Person's Position *
Auspicing Organisation's Contact Person's Phone Number *
Must be an Australian phone number. Include area code. Eg (08)
Auspicing Organisation's Contact Person's Email Address *
Must be an email address.
Must be all elliali address.
Authority from Auspicing Organisation *
Attach a file:
Please attach letter from the auspicing organisation confirming agreement to auspice. This must be
signed by an authorised person (eg. CEO, Chairperson).
Auspice Organisation's ABN *
Auspice Organisation's Abiv
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 <u>More information</u>
ACNC Registration

Main business location		
Must be an ABN.		
Auspice Organisation's A	CN (if applicable)	
must be number		
3. Project Informatio	n	
* indicates a required field		
3.1 Project Details		
Project Title *		
December 15	and a	
Recommend no more than 15 w		
Short project description	*	
Word count: Must be no more than 150 word Provide a short description of yo	ls. our project explaining what you լ	plan to do.
Upload a detailed descrip Attach a file:	tion of the project	
For example Business Plan, Proj	ect Plan, Business Case etc.	
Estimated Project Start D	ate	
,		
Must be a date.		
Estimate Project End Date	e	
Must be a date.		
Which Local Government	Area(s) will your project b	e delivered in? *
☐ Ashburton, Shire of☐ East Pilbara, Shire of	☐ Karratha, City of	□ Port Hedland, Town of
Primary Category *	EducationEnvironmentHealthHousingMining	RecreationalTourismTransportUtilities, Power & Water

4. RED Grants Objectives

* indicates a required field

outcomes.

Your project must meet one or more of the RED Grants objectives outlined in the Guidelines.

Describe what is expected to be achieved and the benefits and/or outcomes of the project against the objectives most relevant to your project.

Outcomes refer to the intended economic impact that is expected as a result of delivering the project with the grant funding – the expected outcomes provided should be realistic as you will be expected to report against these under a Grant Agreement and Final Report for the acquittal of the project if successful.

Please include What, When, Where and How your project will specifically meet the identified objectives. This can include your current situation, timeframes and targets showing how it will differ after project implementation.

If you would like to review the RED Grants Objectives and descriptions of metrics for each, please click here.

Please indicate which RED Objectives are most applicable to your project: * □ 1. Sustainable jobs □ 2. Expanding or diversifying industry □ 3. Developing skills or capabilities □ 4. Attracting new investment in the region □ 5. Increasing productivity Applicants are encouraged to select the objectives most applicable to the project. Please provide detailed descriptions in the corresponding fields below.
4.1 Sustainable jobs
How will the project create jobs as a result of the grant?
MAX: 600 Words. Please complete Metrics table at the bottom of this section to quantify your outcomes.
4.2. Expanding or diversifying industry
Which industry will benefit from the project and how will it increase the current value of that industry to the regional economy?
Word count:

MAX: 600 words. Please complete Metrics table at the bottom of this section to quantify your

4.3. Developing skills or capabilities

What core skills or capabilities will be developed, and how regional gaps and be applied to generate jobs and growth	
Word count:	tion to quantify your
MAX: 600 Words. Please complete Metrics table at the bottom of this secont outcomes.	tion to quantily your

4.4. Attracting new investment in the region

How will the project unlock future investment in the organisation, industry or region? What is the source of this investment and likelihood it will be secured?

Word count:

MAX: 600 Words. Please complete Metrics table at the bottom of this section to quantify your outcomes.

4.5. Increasing productivity

What impact will the Granapplicant's business or or	nt have on the productivity or performants on the productivity or performance or	ormance of the
Word count:		

MAX: 600 Words. Please complete Metrics table at the bottom of this section to quantify your outcomes.

Our metrics

A metric is a measurement designed to indicate whether or not progress towards an outcome is occurring, and quantify the extent to which it is occurring. Here we would like you tell us which of our quantitative metrics you may be able to report on.

Metric	Baseline	Target	Timeframe		Explanatory notes
metrics (if any) will you track?	starting point? Identify a figure	target for the	When will the target be reached?		Add notes if you need to provide more context.
required to			1	interviews/	

report on your progress. Add more rows if you want to list additional metrics.	the current situation. Must be a number.	estimated total for your project. Must be a number.	case studies, focus groups, administrative data (e.g. case management data), observation/ estimation, government or public dataset (e.g. Census), other datasets.	

4.6 Pilbara Development Commission Regional Priorities

Over and above the Objectives of the RED grants, the Pilbara Development Commission Board has endorsed the following regional priorities/themes as part of its strategic plan. Projects that demonstrate alignment with the region's priorities will attract a higher weighting in the assessment process.

Please indicate which of the following Pilbara regional priorities/themes are MOST applicable to your project.

Pilbara Development Commission Regional Priorities * □ Economic development, diversification and innovation □ Aboriginal empowerment and prosperity	
How does the project support the Pilbara Regional Priorities?	*
Word count:	
MAX: 600 words	
How does the project meet industry demand or an identified n region?	eed in the Pilbara
Word count:	
Must be no more than 250 words.	

5. Project Budget, Cash Co-contribution and Leveraged Funding

* indicates a required field

How does the project benefit the broader community/industry?

Financial Audit

For projects requesting more than \$50,000 RED funding, audit costs must be included in the budget table.

5.1 Project Cash

Please detail project items to be funded through CASH contributions. Applicants should refer to Section 4 of the Guidelines to confirm items or activities that are ineligible for RED funding before completing this section.

Please attach quotes for all budget line items to justify funding requests. If funding has been secured from other sources please attach written evidence.

Note: Please enter whole dollars only.

Please add additional lines if required.

Project Expendito Items	u:Funds	t Applicant contribut d (Cash) (e GST)	iɗunding	Name of other funding sources	Other Funding Sources Entity Type	Confirmed Funding?	
	Must be a dollar amount.	Must be a dollar amount.	Must be a dollar amount.		Where is the money being sourced from?		
	\$	\$	\$				
	\$	\$	\$				
	\$	\$	\$				

5.2 Total Project Budget

This section is **AUTO CALCULATED** from the above table and amounts will be transposed to Section 3.1.

Total of RED Grant Funds	Total Application Contribution	Total of Other Funding Sources	TOTAL (A+B+C)
requested (ex GST) A	(ex-GST) B	(ex GST) C	¢
\$	\$	\$	P
Ψ	Ψ	Ψ	This number/amount is
This number/amount is	This number/amount is	This number/amount is	calculated.
calculated.	calculated.	calculated.	calculated.

5.3 Applicant Contribution Funding Details

How wil	ll the applic	cant's cont	ribution b	e funded?	*

NOTE: This does not include State funding. Please describe whether the project will be self-funded from cash reserves, external investment either as equity or debt, bank loan or other form of debt financing.

Form Preview

Can the project proceed if the requested funding (RED Grown Yes		
If yes, explain how the promay affect project.	ject could proceed with re	educed funding and how this
, , ,		
Options to consider: increasing th project into stages.	e applicant co-contribution; mo	difying the project; or breaking the
Quotes and other fundi	ng	
Attach quotes and evidence of	f secured funding from other	sources.
Attach a file:		
5.4 In-kind Contribution	ı (non-cash)	
Please detail any in-kind co	ontributions and how the	ir value has been calculated.
Use the table below to itemise pro	oject items funded through in-ki Name of in-kind source	ind contributions. Estimated value
rioject item	Name of m-kind source	Must be a dollar amount.
		\$ \$
5.5 Other RED Funding Are you applying for RED G Development Commission for Yes If yes, please advise which Comm	for this project? * O No	-
RDC Region	Application	n number (if known)
5.6 Other Funding Prog	rams	

Page 11 of 18

Has your organisation applied for, or been approved for funding for this project from any other State Government program? *

0 V			o. Na		
O Yes If yes, please pro	ovide details incl	uding the amoun	O No t requested and	the funding statu	JS.
Please add add	ditional lines if r	required.			
Date of Application	Approved / Pending	Purpose of Funding	Amount	Name of Program	Contact Person
Must be a date.			Must be a dolla amount.	ar	
			\$		
6. Partners * indicates a re	ships and C	Collaboratio		g been investigat	ted for the project?
Provide the nthe project. *		tails of local s	takeholders a	and their leve	el of support for
	ng and decision n	ou may have invo			community and provided to support
Letters of Su Attach a file:	pport (Option	al)			
	sidered deve	loping partne	rships or coll	aborations fo	r the project? If

6.2 Local Content

Please detail below how your project meets the following Local Content objectives:

• Building the capability of local suppliers, and providing opportunities for regional businesses to supply items/services for the project;

Form Preview

- Increasing regional employment and regional business participation through subcontractors, suppliers, apprenticeships and traineeships;
- Supporting emerging or new industries in the region, and promotion and awareness of local industry and businesses; and
- Benefiting the local regional economy through any other identifiable means.

O Yes Local content for the purposes of this RED grant ap services in the Pilbara region.	○ No
Local content % *	
Must be a number. Please estimate the percentage of local content that	at will be applied to your entire project.
Local content details *	
Please detail goods and/or services to be sourced to content objectives listed above. If you do not intend	
7. Project Planning and Governar	ice
* indicates a required field	
Is the project ready to start if grant fund O Yes If No, please contact the PDC on (08) 9173 8401 be	○ No
Has a feasibility study or business plan in prepared for the project? *	ncluding a cash flow analysis been
O Yes O No If yes, please upload the document in the next que:	Not Applicablestion.
Please upload a copy of the feasibility st Attach a file:	udy or business plan.
7.1 Approvals	
Have the necessary planning and/or build obtained? *	ling approvals for the project been
O Yes O No If yes please fill in table below	Not Applicable

Planning/l no.	Building/Li	cense S	Status		Planni (Optio	ng Docume nal)	ents
7.2 Time	line and	Milesto	nes				
undertaken		our proje	estone table b ect. For compl				
Milestone	Start date	End dat	e Milestone status	Milestone Payment		oEvidence of Milestone Achievem	
One per row. e.g. Planning; recruitment; evaluation. Add more rows if you want to list additional milestones.	Leave blank if date is unknown or not relevant. Must be a date.	Leave bla if date is unknown or not relevant. Must be a date.	the status of this milestone?	Insert a payment amount against each Milestone (including \$0 if no payment) Must be a dollar amount.	Add notes if you need to provide more context.		What precisely must the Recipient deliver/do?
		<u> </u>				<u> </u>	
Project Ti ll Attach a file	meline (Op e:	tional)					
7.3 Proje	ect Gover	nance					
How will y	our organi	isation e	nsure the pr	oject is m	anaged res	ponsibly?	*
Who will ma	nage the proj	ect and wl	hat qualificatior	ns, skills and	experience d	o they have?	
How will of		nd main	tenance cos	ts for the	project be	met beyon	d the

For example, if the project creates two new jobs, or commissions new equipment, how does the organisation plan to sustain these jobs / cover maintenance costs?

7.4 Risk Assessment for your Project

Identify the risks associated with the Project (that the applicant can reasonably control or influence) and include issues that may prevent the Project progressing or that may hinder the achievement of the stated Project outcomes being achieved. Consider and explain the risk mitigation strategies that will minimise the effects of each stated risk.

Probability:

Low - Unlikely to occur during the project period and with little impact on the project

Medium - Possibility of occurrence and with some impact on the project

High - Very likely to occur during the project period and potentially impacting heavily

Please complete the Risk Assessment table below, or attach a copy of your Risk Management Plan to your application.

Risk Description	Risk Probability	Mitigation Strategy
	(Low, Medium or High)	
	- 	

Risk Management Plan (Optional) Attach a file:
Upload a copy of your Risk Management Plan

8. Market Viability and Commercialisation

- * indicates a required field
- 8.1 Market Conditions

your project	
Eg. market gaps, market size, estimation of new or increased sales.	
Describe any major competitors to your project or project ac	tivity in the region

Please provide a summary assessment of the market conditions in relation to

8.2 Financial Information

To enable the PDC to undertake a financial viability assessment of the organisation please upload the following financial information:

- 1.Financial statements verified by a Certified Practising Accountant, Chartered Accountant or Registered Auditor for the last two (2) years;
- 2.Current year-to-date financial information (income and expenditure statement and/or balance sheet).

Upload Financial Information Attach a file:
If you have NOT provided the requested financial information above, please outline why
For example, business operating for less than 2 years / never had financial statements verified by CPA Chartered Accountant or registered Auditor.
8.3 Liabilities
Please note, you may be required to provide documentation upon request relating to the following information.
Please indicate if any of the following apply: * The applicant or any of its senior office bearers have been involved in any litigation or prosecution in the past three (3) years The applicant or any of its senior office bearers (directors, partners, presidents, executive directors, project managers) have been involved with any business failure, including liquidation, voluntary administration or receivership There is a significant financial matter which may impact on the ability of the applicant to deliver the project (past, present or future) There are future commitments or contingent liabilities that might materially affect the applicant in the delivery of this project or performance of the activity The applicant has, at any time, been found in default of its creditors Confirm none of the above apply

9. Application Checklist

* indicates a required field

By submitting this Application, I acknowledge: * ☐ I have read the Guidelines and I acknowledge the eligibility criteria for funding. ☐ I have contacted the Regional Development Commission to discuss the project. ☐ Information provided in this application is to the best of my knowledge, accurate and complete. ☐ This Application is authorised by my organisation and includes the CEO/Chair signature. ☐ Audit costs (if applicable) are included in the budget and the nominated auditor is a member of the Institute of Chartered Accountants in Australia, the Australian Society of Certified Practicing Accountants or the National Institute of Accountants and is independent
from the Grantee. ☐ The Regional Development Commission may request additional information from applicants. ☐ The Regional Development Commission is authorised to contact any persons or organisations in the assessment of the application and understand that information may be
provided to other agencies, as appropriate. Please ensure you have answered all the questions and provided relevant details where requested. Supporting documents are supplementary to your application.
This application includes all required attachments: □ Copy of Incorporation Certificate (if applicable) □ Copy of organisation's annual financial statements for the last two (2) financial years □ Quotes for all budget line items to justify funding request □ Written evidence of funding contributions from other sources
Upload addition information and supporting documents here: Attach a file:
Applicants may upload additional attachments to their Application. (Maximum 25mb, recommended size no bigger than 5mb).
9.1 DECLARATION
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 to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant is successful, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.
I do hereby declare that all the information supplied in this application form for RED Grants funding is, to the best of my knowledge, accurate and complete; that I have read and accept the requirements of the Guidelines, and that the Regional Development Commission to which this application has been submitted to will be notified of any change to the information supplied and any other information or circumstances arising that may affect this application.
Name * Title First Name Last Name
Position/Title *

Name of Organisation (Legal Entity) * Organisation Name	
organisation name	
Name of organisation as listed in official documentation such as ABR, ACN	IC or ATO
Email *	
Must be an email address.	
Dated *	
Must be a date.	

9.2 Submit your application

Please move to the next page and click **Submit** to complete your application.

You will receive an email to confirm your submission has been received. If you do not receive an email please check your junk email folder. Please keep a record of your submission number.

To view your submission at any time, please go to https://dpird.smartygrants.com.au/applicant/login, enter your email address and password then click Log In.

Once you are logged in click on the My Submissions link near the top of the page.

NOTE: You may download a PDF of your applications prior to submission.

Thank you for your application!