

2025/26 COMMUNITY GRANTS

Minor Grant Application Form

Please check one: ☐ Centenary Grants ☐ Community Grants

Dates: Applications will be accepted between 8am Friday 1 August to 4pm Sunday 31 August 2025

Minor Grant: You may apply for a grant up to \$2000 to be used on capital purchases or initiatives

More information: If you have any questions regarding the application process, please contact Katherine Town Council on **08 8972 5500** or email records@ktc.nt.gov.au

Application Process

To apply for funding through the Katherine Town Council Community Grants Program, please follow the instructions below:

1. Download the PDF application form to your computer.
2. Complete the application form. The form can be partially completed, saved, reopened and edited as often as required until you are ready to submit.
3. The grant round opens 8am Friday 1 August and closes 4pm Sunday 31 August 2025.
4. Application outcomes will be advised by email September 2025 to the contact details provided in this application form.

Project Details

Project Title:

Project Start Date:

Project End Date:

Amount Requested:

Total Project Cost:

Briefly summarise the project you are seeking funding for:

Project Details

Will the project still proceed with less money?

Yes

No

How does this project align with the Katherine 2027 Five Year Strategic Plan?

Full registered name of Organisation:

Does your organisation operate as a not for profit?

Yes

No

Is your organisation incorporated under the Associations Act (NT)?:

Yes

No

Certificate of incorporation No:

Is your organisation supported by an Incorporated Association that accepts legal and financial responsibility of the grant:

(If yes, details to be provided at end of this application)

Yes

No

Australian Business Number (ABN):

(If not ABN, please supply a copy of the Statement by Supplier Form.)

Public Liability Insurance Number:

Is your organisation registered for GST?

Yes

No

Postal Address:

Street Address:

Name of Authorised Representative
(President or Chairperson):

Name of contact person for the project:

Position:

Position:

Phone Number:

Phone Number:

Email:

Email:

Briefly describe what activities and services your organisation provides?

Budget

Project Budget: the budget is critical for the consideration of your grant application. It is important that you be as specific and as accurate as possible.

| Project Income | |
|--|--|
| Amount sought from KTC community grant | |
| Organisations contribution | |
| Other sources of grant funding | |
| In-kind* contributions | |
| Sponsorship (if applicable) | |
| Fundraising (if applicable) | |
| Other | |
| | |
| Total Income | |

Please itemise the project expenditure

| Project Expenditure | |
|---------------------|--|
| | |
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| | |
| Total Income | |

Note that the budget must balance i.e. the total income must equal total expenditure.

*In-kind contributions are non-cash contributions of equipment, materials, time and services. An estimated value should be given for each item. In-kind contributions should be listed as both an income and an expense item.

Declaration

I have read and agree to the Terms and Conditions set out in the Grant Application Guidelines. I certify that all the information provided is current and correct, and I give permission to the Council to contact any persons or organisations in the processing of this application.

Signed for and on behalf of the organisation or sponsor. Only the Public Officer, President or Chairperson (or another officer formally delegated such authority) of the organisation which is to receive the grant is to sign.

Signature:

| |
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Name:

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Position:

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Incorporated Associations Consent

We verify that the following organisation has agreed to manage this Community Grant Funding on our behalf: (Only applicable if you are not an Incorporated Association)

Organisation Name:

Contact Person Name:

Organisation Chairperson/President Name:

Contact Person Position:

Postal Address:

Organisation Physical Location:

Daytime Telephone:

Organisation ABN:

Organisation Certificate of Incorporation No:

Privacy Statement

The information requested by this form is being collected by the Council for the purpose of considering a grant application and amongst other things, providing appropriate services to ratepayers, carrying out the Council's functions, and in some cases, for compiling or reporting statistics. The Council may disclose the information provided by you on this form to a third party, as required or authorised by By-laws, Local Government Act or in accordance with our Privacy Policy, which is available on our website or on request from the Council office. You may obtain access to your personal information held by Council by submitting an application form that is available at Council or by contacting the Events Coordinator on (08) 8972 5500.