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Request for Rate Based Financial Assistance for Not for Profit Recreation, Sporting & Community Groups

For this application, you MUST:

- Complete all questions on this form;
- Provide any mandatory supporting information identified on the form as being required to accompany your application.

Please allow 10 working days for processing

SECTION 1 – PROPERTY DETAILS			
Assessment Number:			
Property Address:			
Lot and Plan Details of Property:			
SECTION 2 – APPLICANT DETAILS			
Organisation Name:			
Registered Address			
Postal Address:			
Telephone:	Mobile:		
Email:			
SECTION 3 – ORGANISATION DETAILS			
What is the Primary Purpose of your organisation:			
Time Organisation has Existed:			
Number of People Organisation Services:			
Is the applicant the owner / lessee and occupier of the land:		□ Yes	□ No
Does your Organisation/Club/Premises hold a licence to sell liquor?		☐ Yes	□ No
(If yes, please give details):			
Does your Organisation/Club/Premises have gaming machines?		☐ Yes	□ No
(If yes, please give details):		l res	□ NO
Does your Organisation/Club/Premises have a contractual arrangement, either formally or informally, with a third party that derives an income or benefit as a result of this arrangement? E.g. third party is permitted use of the organisations assets and derives an income from this (If yes, please give details):		☐ Yes	□ No
Is any part of the land rented or leased to a third party?		☐ Yes	

SECTION 3 – ORGANISATION	DETAILS continue	ed				
Does your organisation have		the property? rage charges applicable, please a	advise			
how many WC's and urinals a WC's Urin	are onsite:	age charges applicable, picase (advise	☐ Yes	□ No	
Reasons why your organisation		assistance:				
Have you attached the requir	ed documentation	n listed below with this applicati	ion:	☐ Yes	□ No	
SECTION 4 – SUPPORTING D	OCUMENTATION					
This application MUST be sup	ported with any a	pplicable documentation relatir	ng to:			
 The Constitution of the Organisation eg. The Constitution must clearly state prohibitions on any member of the Organisation making a private profit or gain; either from ongoing operations of the Organisations, or as a result of distribution of assets if the Organisation is wound up. A copy of the organisation's Certificate of Incorporation A copy of the most recent Annual Financial Report. Any other relevant information supporting that the Organisation is a non-profit entity or otherwise exists for a public purpose. 						
Please note that this rebate	<mark>is not available on</mark>	Vacant land				
DECLARATION - This applicat	tion must be signe	d by two (2) Executive Membe	rs of the O	rganisation		
We declare that the information provided by us in this application is true and correct and consent to the making of enquiries and exchange of information with authorities of any Local, State/Territory or Commonwealth department in regards to any matters relevant to this application.						
Authorised Person Name 1 and Position:						
Signature:			Date:			
Authorised Person Name 2 and Position:		_				
Signature:			Date:			
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OFFICE USE						
☐ Assessment number written on form ☐ Copies of documentation attached						

 \square ALL Questions answered

 $\hfill\square$ Check rates database and ensure all details are correct