

**Community Benefit Fund**  
**Mount Emerald Wind Farm Pty Ltd**  
 PO Box 1058  
 North Sydney NSW 2059  
 Telephone: 02 8913 9400  
<http://mtemeraldwindfarm.com.au/>  
[communityfund@ratchaustralia.com](mailto:communityfund@ratchaustralia.com)



### Application Form

Applicants must refer to the Mount Emerald Wind Farm Community Benefit Fund **Guidelines and Terms and Conditions** before completing and submitting this Application Form by email or post to the details on the top left.

Section 1 – Organisational / Applicant Details			
Name of Applicant <small>(please provide entity details if applicable)</small>			
Street address			
Postal address			
A.B.N./A.C.N . <small>(if applicable)</small>		Phone number	
Contact person and role <small>(if applicable)</small>			
Email address			
Please tick the relevant box and provide evidence if requested			
<input type="checkbox"/>	Does the Applicant have Deductible Gift Recipient status (DGR)?		
<input type="checkbox"/>	Is the Applicant a registered charity?		
<input type="checkbox"/>	Is the Applicant registered for GST?		
How did the Applicant hear about the Mount Emerald Wind Farm Community Benefit Fund?			
Section 2 – Project overview			
Please note that <b>Eligible Projects</b> (please refer to the Fund guidelines) will be provided preference in assessment and any grant of funding. <small>If insufficient space, can be supplemented with maximum of 1 additional page</small>			
Project name and description <ul style="list-style-type: none"> <li>Provide an overview of the proposal / project (approx. 30 words)</li> <li>Advise of project start and finish date</li> <li>Please advise if partial or staged funding of your project is possible</li> </ul>			
Project location			
Objectives <ul style="list-style-type: none"> <li>What are the project's aims?</li> <li>What problem or issue is the project trying to address?</li> <li>Who will benefit from the project?</li> </ul>			

<b>Outcomes</b> <ul style="list-style-type: none"> <li>• Inspire us! What does success look like?</li> <li>• Explain how the project will                         <ul style="list-style-type: none"> <li>○ benefit the community</li> <li>○ build resilience and self sufficiency</li> <li>○ comply with the Trust's Objects</li> </ul> </li> </ul>				
<b>Section 3 – Application for funding</b>				
<b>Budget and allocation of funds</b>		<b>Hours</b>	<b>Rate</b>	<b>Total (\$)</b>
<b>Expenses</b> If there are several elements to the project, please let us know here. Use an additional sheet if necessary. This will allow the advisory committee to consider opportunities for partial funding.  <b>If quotes have been obtained, please provide copies or a summary with the application</b>	Administration costs			
	Equipment			
	Materials			
	Promotions			
	Consumables/ stationery			
	Labour/ contract work			
	Other expenses			
	<b>Subtotal of expenses</b>			
<b>Income</b> The Applicant may be required to provide evidence of this information if requested.	Other grants received or anticipated to be received			
	Other funding			
	Applicant's own contributions			
	In-kind support (non-monetary)			
	Other income			
	<b>Subtotal of income</b>			
<b>Calculated budget</b>	Expenses subtotal			
	Minus income subtotal			
	<b>Estimated budget</b>			
<b>Grant requested from the Fund</b>				

<b>Timeframe</b>	
What is the expected timeframe of the project?	
Do any time constraints apply?	
<b>Applicant bank account details</b>	
Account name	
Institution and branch	
BSB number	
ACC number	
<b>Section 4 – Project Reporting</b>	
<b>Evaluation</b>	
How will the Applicant evaluate the success of the project?	
<b>Section 5 – Confirmation of submission</b>	
If any documents have been submitted with this application form, please list them here.	
<b>Signed by the Applicant or for and on behalf of the Applicant by its authorised representative</b>	
On behalf of	<i>(insert name of Applicant)</i>
I acknowledge that if successful in receiving a grant of funding, the Applicant will be required to report on the outcome of the support and the outcome of the project.	
This may be in the form attending community events to share learnings from the project, acknowledge the sponsorship received at community events or posing in photographs for the Fund's communications e.g. newsletters and social media.	
I acknowledge and agree to the Mount Emerald Wind Farm Community Benefit Fund Guidelines and Terms and Conditions.	
I acknowledge and agree that the information provided in this application form is true and correct to the best of my knowledge, and if any information is false or misleading that any offers of funding may be withdrawn or funding provided is to be repaid to the Fund.	
Name of duly authorised representative <i>(if required)</i>	Signature of Applicant or duly authorised representative
Date:	

Please note that the Fund will only take information required to assess this application and to contact the Applicant for any further enquiries. A copy of our Privacy Statement is available on request. Please contact [communityfund@ratchaustralia.com](mailto:communityfund@ratchaustralia.com) for any queries.