Ryan Corner Devlopment Pty Ltd
ABN: 75 130 542 915
Level 2
73 Northbourne Avenue
Canberra ACT 2601

Ryan Corner District Grant Program

Must benefit communities within a 12km radius of Ryan Corner wind farm (See guidelines).

Application Form – Item purchase only

If you wish to receive a version of this form in MS Word, please email a request to ryancornerwindfarm@globalpower-generation.com.au.

1.Contact details

Organisation name	
Address:	
Contact Name:	
Phone:	
E-mail:	

2. Is your organisation a Not for Profit? **Yes / No**

3. Is your organisation auspiced for the purpose of this application/project? **Yes / No**

4. About your organisation and the auspicing organisation (*if applicable)*

Legal name	
ABN *(if applicable)*	
Are you registered for GST?	
Auspicing organisation *(If applicable)*	Name: ABN: Contact details: Agreement in place: Yes/No
Public liability Insurance	Yes/No Amount $
Have you previously applied to this program?	Yes/No If successful, amount $ Year awarded

What is the focus of your purchase?	☐ Community development
Refer to guidelines	☐ Environment
	☐ Education and training

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Please tell us about the main activities of your organisation including your aims and objectives and the benefit you provide to the local communities *(no more than 150-200 words).*

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5. Application information

Please read the Ryan Corner Community Benefit Fund Guidelines for details on the types of projects or initiatives that may be eligible for funding. The following sections, A to E, correlate with the Funding Criteria in the Application Guidelines. You may add extra pages if you need, please remember to attach them to your application.

A. Please describe the project or initiative you are requesting funds for including the reason and objectives. *(No more than 200 words as a total for the three sections).* **Score -15%**

1. Purchase description
   What do you need to purchase and the reasons why?

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B. What are the benefits to the Ryan Corner district communities? *(No more than 250 words as a total for the three sections).* **Score 50%**

- Benefits – How will your purchase benefit the Ryan Corner district communities?
- Extent of benefits – How long will the Ryan Corner district communities benefit from your purchase?
- Beneficiaries – Which members of the Ryan Corner district communities will benefit from your purchase?

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C. Do you have support for your project? *(No more than-200 words as a total for the three sections).*

Score 10%

- Community support – please attach supporting documents
- Support within your organisation – please attach supporting documents
- External agency support (*if applicable)* – please attach supporting documents

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D How much are you requesting from the Ryan Corner District Grant Program? Please attach evidence of estimates and quotes. **Score 25%.**

Expenditure Item	**Amount**
Total	**$**

Have you applied for other sources of funding for this project? If so, please complete the table below.

Will your purchase proceed if the application is not successful or if it is part funded? **Y/N**

Name	Amount requested	Approved Yes/Pending	Amount approved
			`

6. Further information

Have you more than one application in this funding round? Please prioritise.

1.
2.
3.
4.

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7. Checklist

- ☐ Check the closing date
- ☐ Read and understood the guidelines
- ☐ Completed all sections of the application form
- ☐ Included all supporting documents *(If applicable)*
    - Evidence of organisation legal structure
    - Evidence of auspicing agreement (if applicable)
    - Evidence of support (community, your organisation and others)
    - Evidence of current insurance
    - Written consent from the landowner if your organisation does not own the facility (in case of facility improvement applications)
    - Supporting information e.g. quotes, budget
- ☐ Signed declaration

Send your completed application by email to ryancornerwindfarm@globalpower-generation.com.au or by post to

Ryan Corner District Grant Program

Ryan Corner Development Pty Ltd
Level 2
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Canberra ACT 2601

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8. Declaration:

I certify the information contained in this application is correct, and that I am authorised to make the application on behalf of the above organisation.

SIGNATURE: _____ DATE: _____

NAME: _____

POSITION: _____

PHONE: _____

EMAIL: _____

Please note, if your application is successful, your organisation will be invited to attend an event later in the year to present to the other community benefit fund recipients, details of your project.