## Kimberley RED Grants Round 7 Application Form

#### 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 at the Kimberley Development Commission website.

All applicants are encouraged to discuss their project with the Kimberley 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 Kimberley Development Commission on 08 9148 2100 or 0439 488 432, or via email GPO@kdc.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).

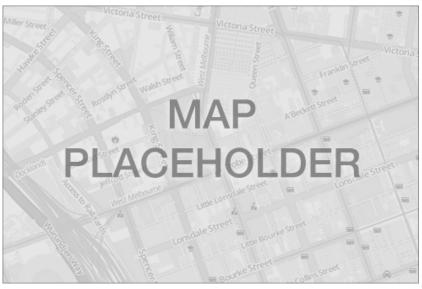
RDCs and DPIRD are also subject to the Freedom of Information Act 1992 and documents in the possession of these agencies are subject to these provisions.

I have read and understood	the privacy statement and	I consent to and authorise
such uses and disclosures.	:	

○ Yes I confirm

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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 Business Register
ABN
Entity name
ABN status
Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type <u>More information</u>
ACNC Registration
Tax Concessions
Main business location
Must be an ABN.
Frading Name
Name that will be referred to for the delivery of the project (if different to Legal Entity Name above)
Primary Street Address * Address



ust be no more than 300 words.	ship, please provide names of all partners/
ord count:	
	ctivities that are currently undertaken *
	e nature of your business and include any
ust be a URL.	
rganisation 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 *
Must be an email address.
Plase De all'ellan 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
Organisation name
Auspice Organisation's Postal Address *
Address

Address Li	ne 1, Suburb/Town,	State/Province, and	Postcode are required.	
Auspice	Organisation's V	Vebsite		
Marablana	LIDI			
Must be a	UKL.			
<b>Auspicin</b> Title	g Organisation's First Name	Contact Person Last Name	<b>1 *</b>	
Auspicin	g Organisation's	Contact Person	1's Position *	
Auspicin	g Organisation's	Contact Person	n's Phone Number *	
	n Australian phone n ea code. Eg (08)	umber.		
Auspicin	g Organisation's	Contact Person	n's Email Address *	
Must be an	n email address.			
Mast be at	remail address.			
Authority Attach a f	y from Auspicing	g Organisation *	•	
/ tetaerr a r	inc.			
	ach letter from the a an authorised perso		on confirming agreement rson).	to auspice. This must be
Auspice	Organisation's A	ABN *		
-	J			
	provided will be us at you have entere	•	following information. ly.	Click Lookup above to
Informatio	on from the Australia	n Business Registe	r	
ABN				
Entity nan	ne			
ABN statu	S			
Entity type				
	Services Tax (GST)			
DGR Endo	rsed			
ATO Chari	ty Type	More inform	<u>ation</u>	
ACNC Reg	istration			

Tax Concessions

Main business location	
Must be an ABN.	
Auspice Organisation's ACN (if applicable)	
Must be a number.	
3. Project Information	
* indicates a required field	
3.1 Project Details	
Project Title *	
Short project description *	
Word count: Must be no more than 150 words. Provide a short description of your project explaining what you plan	n to do.
Upload a detailed description of the project Attach a file:	
For example Business Plan, Project Plan, Business Case etc.	
Estimated Project Start Date	
Must be a date.	
Estimate Project End Date	
Must be a date.	
Which Local Government Area(s) will your project be	delivered in? *
☐ Broome, Shire of ☐ Halls Creek, Shire of	<ul><li>Wyndham East Kimberley</li><li>Shire of</li></ul>
☐ Derby-West Kimberley, Shire of	Jille 01
Which sector is most applicable to your project? *	
<ul><li>Agriculture</li><li>Economic</li><li>Development</li><li>Housing</li></ul>	○ Tourism
○ Communications ○ Education/Training ○ Mining	

○ Culture	<ul><li>Environment</li></ul>	<ul> <li>Recreational</li> </ul>	○ Utilities, Power & Water
<ul><li>Community</li></ul>	○ Health	O Retail Trade	<ul><li>Other Services</li></ul>
4. RED Grants O	bjectives		
* indicates a required t	field		
Your project must m Guidelines.	eet one or more of t	he RED Grants object	tives outlined in the
	cted to be achieved and most relevant to your p	d the benefits and/or ou project.	tcomes of the project
the project with the gra	ant funding – the expect o report against these u	pact that is expected as sted outcomes provided under a Grant Agreemer	should be realistic as
	clude your current situa	our project will specific ation, timeframes and to	ally meet the identified argets showing how it
If you would like to rev please click <u>here.</u>	iew the RED Grants Ob	jectives and descriptior	ns of metrics for each,
<ul> <li>□ 1. Sustainable jobs</li> <li>□ 2. Expanding or div</li> <li>□ 3. Developing skills</li> <li>□ 4. Attracting new in</li> <li>□ 5. Increasing production</li> <li>Applicants are encourage</li> </ul>	versifying industry s or capabilities nvestment in the regior activity	most applicable to the pro	
4.1 Sustainable jo	obs		
How will the project	create jobs as a res	ult of the grant?	
MAX: 600 Words. Please outcomes.	complete Metrics table at	the bottom of this section	to quantify your
12 Evpanding or	divorcifying indu	ctry	

### 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 t outcomes.	the bottom of this section to quantify your	
4.3. Developing skills or capabilities	3	
What core skills or capabilities will be de- regional gaps and be applied to generate		5
Word count:		
MAX: 600 Words. Please complete Metrics table at toutcomes.	the bottom of this section to quantify your	
4.4. Attracting new investment in th	ne region	
How will the project unlock future investi		
region? What is the source of this investr	ment and likelinood it will be secu	rea
Word count:	the hottom of this section to quantify your	
MAX: 600 Words. Please complete Metrics table at toutcomes.	the bottom of this section to quality your	
outcomes.	the bottom of this section to quantity your	
	the bottom of this section to quantity your	
outcomes. 4.5. Increasing productivity		
outcomes.		
outcomes. 4.5. Increasing productivity What impact will the Grant have on the p		
outcomes. 4.5. Increasing productivity What impact will the Grant have on the p		
outcomes. 4.5. Increasing productivity What impact will the Grant have on the p		

#### **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. For the REDs

objectives that your project seeks to address please provide the outcomes (metrics), the targets you expect to achieve, the timeline for doing so, and how you will measure these.

Metric	Baseline	Target	Timeframe	Collection method	Explanatory notes
E.g. Jobs (FTE), Production, Personnel trained. Add	What is the starting point? Identify a figure that reflects the current situation. Must be a number.	Identify a target for the metric you have chosen - an estimated total for your project. Must be a number.	When will the target be reached?	How will you collect and verify the data, or measure your achievement? E.g. survey, interviews/ case studies, focus groups, administrative data (e.g. case management data, contracts), observation/ estimation, government or public dataset (e.g. Census), other datasets.	

### 4.6 KDC Regional Priorities

In addition to the RED grant statewide objectives, the Kimberley Development Commission identified the following regional priorities as part of its strategic plan. Projects that demonstrate alignment with these priorities will attract a higher weighting in the assessment process.

Please indicate whether any of the following Kimberley regional priorities are applicable to your project.

<ul> <li>KIMBERLEY REGIONAL PRIORITIES: *</li> <li>□ Increase Aboriginal workforce participation</li> <li>□ Improve housing availability and affordability</li> <li>□ Increase availability of high-quality childcare services</li> </ul>	
How does the project meet industry demand or an identified Kimberley region?	need in the
Word count:  Must be no more than 250 words.  How does the project benefit the broader community/industry?	

Increase Aboriginal workforce participation

What impact will the Grant have on increasing Aboriginal workforce participation?
Word count:
Improve housing availability and affordability
How will the Grant improve housing availability or affordability in the region?
Word count:
Increase availability of high-quality childcare services
How will the Grant increase availability of high-quality childcare services in the region?
Word count:

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

\* indicates a required field

#### 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 <u>Guidelines</u> to confirm items or activities that are ineligible for RED funding before completing this section.

Quotes

Please attach quotes f available for major 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	Red Gran	t Applica	nt Other	Name	Other	Confirmed	dPlease
Expendit	ufeunds	contrib	uti <b>ɗa</b> nding	of other	Funding	Funding?	attach
Items	requeste	d(Cash) (	exSource/s	funding	Source		quote(s)
	(Ex GST)	GST)	(Ex GST)	source/s			

					Entity.		
					Entity Type		
	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	Rudaet					
J.2 10tai	Troject	Daaget					
This section Section 3.1.		CALCULAT	<b>ED</b> from the	above table	and amou	nts will be tr	ansposed to
Total of RED Gran	nt Funds	Total of Own O	Organisation (ex	Total of Other So	ource/s (ex GST)	CTOTAL (A+B+C)	
requested (ex GS \$	T) A	GST) B \$		\$		\$	
This number/	amount is	т	er/amount is	This number calculated.	/amount is	This number calculated.	/amount is
calculated.		calculated.		carcaraccar		carcaraccar	
5.3 Appli	cant Cor	ntributio	n Funding	Details			
1-1-			J				
How will th	ne applica	int's conti	ribution be	funded? *			
			nding. Please nent either as				
			e applicant				
requested ○ Yes	funding (	RED Gran	t and Othe	r Funding -	if applical	ble) in full?	*
If yes, exp	lain how t	the projec	t could pro	ceed with r	educed fu	ınding and	how this
may affect	project.						
Options to co project into s		easing the a	pplicant co-co	ontribution; m	odifying the	project; or bre	eaking the
Quotes a	nd Othe	r Fundin	g				
Attach quot	es and evi	dence of se	ecured fundir	ng from othe	r sources.		
Attach a file	<u>:</u>						

5.4 In-kind Contribution (non-cash)							
Please detail	any in-kind co	ontributions a	and how their v	alue has be	en calculated.		
Use the table be	elow to itemise pr	oject items funde	ed through in-kind	contributions.			
Project item		Name of in-k	ind source	Estimated v			
		1		\$	ar arribaric.		
				\$			
5.5 Other R	RED Funding						
	ying for RED G		from more tha	n one Regio	nal		
O Yes	vise which Comm	nission/s and the	<ul><li>No application number</li></ul>	er if known			
ii yes, piease au	vise willen comin	iissionys and the	аррпсасіон напіж	ei ii Kilowii.			
RDC Region			Application n	umber (if kn	nown)		
REGION	Application number (ii known)						
			R.				
5.6 Other F	unding Prog	rams					
Has vour org	anisation app	lied for. or be	en approved fo	or fundina fo	or this project		
from any oth	er State Gove		am? *				
O Yes  If yes, please pro	ovide details inclu	iding the amoun	<ul> <li>No t requested and th</li> </ul>	ne funding statu	IS		
yes, piedse pi	ovide details illere	anny and announ	requested and the	ie ranamy state			
Please add additional lines if required.							
Date of	Approved /	Purpose of	Amount	Name of	Contact		
Application  Must be a date.	Pending	Funding	Must be a dollar	Program	Person		
Must be a date.			amount.				
			\$				
	_!						
	b C4-						
outline the r	eason wny Sta	ite Governme	nt funding is s	ougnt for th	e project? *		

Why is Government funding required? Has a loan or equity funding been investigated for the project?

### 6. Partnerships and Collaboration

\* indicates a required field

Local content details \*

·
6.1 Stakeholder Engagement
Provide the names and details of local stakeholders and their level of support for the project. *
Word count:  MAX: 600 words. Describe how you may have involved local government, the local community and others n planning and decision making for your project. Genuine support letters from stakeholders will be considered highly favorable.
Letters of Support (Optional) Attach a file:
Have you considered developing partnerships or collaborations for the project? If so, please provide details.
6.2 Local Content
Please detail below how your project meets the following Local Content objectives:
<ul> <li>Building the capability of local suppliers, and providing opportunities for regional businesses to supply items/services for the project;</li> <li>Increasing regional employment and regional business participation through subcontractors, suppliers, apprenticeships and traineeships;</li> <li>Supporting emerging or new industries in the region, and promotion and awareness of</li> </ul>
local industry and businesses; and • Benefiting the local regional economy through any other identifiable means.
Do you intend to use local contractors and/or service providers for your project? *  O Yes  O No  Local content for the purposes of this RED grant application refers to the sourcing of goods and services in the Kimberley region.
Local content % *
Must be a number. Please estimate the percentage of local content that will be applied to your entire project.

Please detail goods and/or service content objectives listed above. If			
7. Project Planning an	d Governan	ce	
* indicates a required field			
Is the project ready to star • Yes If No, please contact the KDC on (		○ No	
Has a feasibility study or b prepared for the project? *		cluding a casl	h flow analysis been
O Yes If yes, please upload the document	○ No		O Not Applicable
7.1 Approvals  Have the necessary planning obtained? *  O Yes If yes, please fill in table below.	ng and/or build ○ No		for the project been
Planning/Building/License no.	Status		Planning Documents (Optional)
_			
7.2 Timeline and Milest	ones		
Please complete the project mundertaken as part of your protimeline (eg. Gantt Chart).			
Milestone		Date for comp	letion

Add additional rows as necessar	у.	Must be a date.		
Project Timeline (Optional	•			
Attach a file:	,			
7.3 Project Governance	9			
How will your organisation	n ensure the p	roiect is manag	ed responsibly? *	
Who will manage the project and	l what qualificatio	ns, skills and exper	ience do they have?	
How will operating and ma	aintenance cos	ts for the proje	ct be met beyond the	
funding period? *			-	
For example, if the project create	es two new iobs. c	r commissions new	y equipment, how does the	
organisation plan to sustain thes				
7.4 Risk Assessment fo	or vour Proje	ct		
7.4 NISK ASSESSITIETIL IL	n your Froje			
Identify the risks associated v				
influence) and include issues the achievement of the state				
risk mitigation strategies that				CITC
Probability:				
Low - Unlikely to occur durin	g the project pe	riod and with little	e impact on the project	
Medium - Possibility of occur	rence and with	some impact on t	the project	
High - Very likely to occur du	iring the project	period and poter	ntially impacting heavily	
Please complete the Risk Ass	essment table b	elow, or attach a	copy of your Risk	
Management Plan to your app	olication.			
Risk Description	Risk Probabi	lity	Mitigation Strategy	
	(Low, Medium o			
Risk Management Plan (O	ntional)			
Attach a file:	p ::0::01/			

Upload a copy of your Risk Management Plan

#### 8. Market Viability and Commercialisation

\* indicates a required field

#### 8.1 Market Conditions

Please provide a summary assessment of the market conditions in relation to
your project *
Eg. market gaps, market size, estimation of new or increased sales.
Describe any major competitors to your project or project activity in the region *
Eg. product or service, proximity, technologies, barriers to market, price.
8.2 Financial Information
To enable the KDC to undertake a financial viability assessment of the organisation please upload the following financial information:
<ol> <li>Financial statements verified by a Certified Practising Accountant, Chartered Accountant or Registered Auditor for the last two (2) years;</li> <li>Current year-to-date financial information (income and expenditure statement and/or balance sheet).</li> </ol>
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

<ul> <li>□ 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</li> <li>□ There is a significant financial matter which may impact on the ability of the applicant t deliver the project (past, present or future)</li> <li>□ There are future commitments or contingent liabilities that might materially affect the applicant in the delivery of this project or performance of the activity</li> <li>□ The applicant has, at any time, been found in default of its creditors</li> <li>□ Confirm none of the above apply</li> </ul>
Please provide further details or comments relating to your answer above *
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
<b>Upload addition information and supporting documents here:</b> Attach a file:
Applicants may upload additional attachments to their Application. (Maximum 25mb, recommended size no bigger than 5mb).

### Kimberley RED Grants Round 7 Application Form

#### 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 of	<b>Authorised Pers</b>	son *		
Title	First Name	Last Name		
The persor	who has the legal a	authority to sign the	Grant Agreement if this a	application is successful
Position/	Title *			
Name of	Organisation (L	egal Entity) *		
Name of or	ganisation as listed	in official documen	tation such as ABR, ACNC	or ATO.
Email *				
Must be an	email address.			
Dated *				
Must be a o	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 <a href="https://dpird.smartygrants.com.au/applicant/login">https://dpird.smartygrants.com.au/applicant/login</a>, 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!