### Instructions to Applicants

### 2025 Heritage Activation Grant

This form is for applicants submitting an application to the Heritage Activation Grant.

Many sites of historical significance in Parramatta are currently under-utilised but have incredible potential to attract visitors from within and outside of the LGA. Through the 2025 Heritage Activation Grants, visitation to these sites will be bolstered by a program of onsite visitor experiences such as tours, workshops, public installations, and performances.

The proposed project must meet one of the following objectives:

**OBJECTIVE 1:** Activate heritage sites and sites of historical significance within the Parramatta LGA beyond the current programming offerings

**OBJECITIVE 2:** Develop skills and provide professional network development opportunities to businesses and individuals contributing to Parramatta's visitor economy

**OBJECTIVE 3:** Increase visitation to heritage sites or sites of historical significance through extending hours of access to sites and the diversification of creative and cultural programming and events

**OBJECTIVE 4:** Stimulate connection to community, through the development of activities that explore the unique identity and rich histories of the Parramatta region.

**OBJECTIVE 5:** To celebrate and amplify Parramatta's complex histories through supporting visitor economy businesses to expand their cultural activities.

General eligibility criteria and information and requirements specific to each of the above categories may be found in the program guidelines located on Council's website **here**.

All applicants are strongly encouraged to read these guidelines before proceeding. Applications close 12 AM, Tuesday, March 4 2025. Funded projects will be completed between 1 July 2025 and 30 June 2026.

**Need Support** Reach out to the Community grants team via email grants@cityofparramatta.nsw.gov.au and quote your application number.

### **Applicant Details**

\* indicates a required field

2025 Heritage Activation Grants

Please read the program guidelines thoroughly before completing this form.

Applicant's Details - The Applicant

Ν	a	m	e	k
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Full legal name (organisation, business, sole trader)

#### **Applicant 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

More information

ACNC Registration

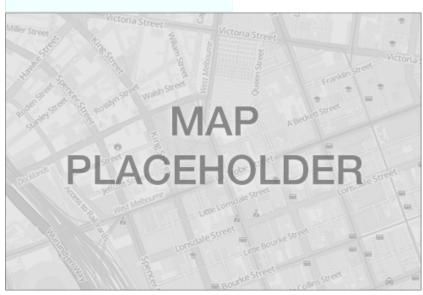
Tax Concessions

Main business location

The applicant must have an ABN to apply.

### **Applicant Postal Address**

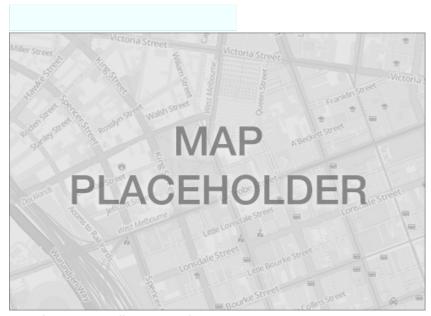
### Address



Any, but at least one field is required.

**Project Venue Address** 

Address



Must be an Australian postcode. Location where the project will take place.

#### Website Does you organisation ☐ Twitter ☐ LinkedIn ☐ Instagram ☐ TikTok use: □ Facebook **Status** Is your organisation Yes $\bigcirc$ No incorporated? \* If yes, please indicate Australian Public Company O Company Limited by Guarantee which form of incorporation. Co-Operative Not-for-profit Incorporated Association Registered Australian Body If Co-operative or Incorporated This is often a number beginning with a Y that is found on your Association, Certificate of Incorporation. please supply your incorporation number. If Registered Australian **Body, please supply** your Australian **Registered Body**

Number.

Form Preview

	ganisation fit or social e *		☐ Yes ☐ No			
Authoris	ed Person					
Authorise organisat	d person of ion *		Title	First Name		Last Name
Position						
Phone nu	mber					
E-mail ad	dress					
Financia	l informatio	n				
	•			inisters Community at recipients can n	•	nts with a focus on e funds responsibly.
For funding	requests betw	een \$5,	,000 and \$10	,000, applicants m	nust p	rovide:
	•			udited financial sta		
If your orga (ACNC) to	anisation is not have audited fir	require nancial	d by the Aus statements,	tralian Charities ar	nd not	-for-profit Commission as registered within
• A Pro	fit and Loss Sta	tement	(certified by	an accredited acc	ounta	nt).
• Organ	isational Baland	e Shee	t (covering t	he last 10 months)		
	load your documents		Attach a file	:		
here. *	aocaments					
	If you do not have an electronic copy of your statements, create a Word Document that simply states that you will be mailing the report and upload that Word file.					
Auspiced group's details						
If this proje this section		ed proje	ect, the orga	nisation or group b	eing a	uspiced should fill out
Name						
<ul><li>Individua</li><li>Organisation</li></ul>	_	)rganisa	ation			
Title I	First Name	Last l	Name			

Auspiced group ABN		
The ABN provided will be used to	look up the following information.	Click Lookup above to
check that you have entered the		
Information from the Australian Busi	ness Register	
ABN		
Entity name		
ABN status		
Entity type		
Goods & Services Tax (GST)		
DGR Endorsed		
ATO Charity Type	More information	
ACNC Registration		
Tax Concessions		
Main business location		
Must be an ABN.		
Auspiced group Address		
Address		
Auspiced group Email		
Must be an email address.		
Auspiced group Website		
March Inc. a LIDI		
Must be a URL.		
General Eligibility		
* indicates a required field		
Bank account details		
	nave a bank account with a minimu	um of two signatories.

Form Preview

Account name *				
Account number *				
Remittance e-mail *				
GST Registration				
If you are successful in your appli provide the funded service/project and Services Tax, Council will pay	ct. If you are formerly register	ed with the ATO for the Goods		
Is the applicant organisation registered for GST? *	O Yes O No Your response to this question does not affect your eligibility. However, if you respond YES, your budget should include GST exclusive amounts. If you answer NO and are not registered, your budget should reflect GST inclusive amounts.			
Insurance coverage				
We require that you have an apple the potential to cause harm or los				
Do you already have insurance coverage for the type of project you are seeking funds for? *	○ Yes	○ No		
If yes, please upload a copy of your existing	Attach a file:			
Certificate of Currency				
from your insurance provider.				
If no, please explain what risk management strategies you will have				
in place by 1st July 2025, including insurance coverage.		s. Your response to this question ver, if you are successful in your to be provided that you have		

### Contacting a Council Officer

We encourage all applicants to have discussed their application with the Grants Program Team prior to lodging an application. This ensures you are able to ask any questions and access any support available.

The Grants Program Team can be contacted via grants@cityofparramatta.nsw.gov.au

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Council Officer name	Date of contact

### **Project Details**

\* indicates a required field

Details on the particular project being applied for

Project Name *	
Amount applied for *	\$ Must be a dollar amount. At least 50% of the funding requested must be matched by the applicant if successful. Funding is capped at \$10,000.
Total Project cost *	\$ Must be a dollar amount. Council will only contribute up to \$10,000 regardless of the total cost of the project. The applicant is responsible for supplying further funds if necessary.
Project Commencement Date *	Must be a date and between 1/7/2025 and 30/6/2026.
Project Completion Date *	Must be a date and between 1/7/2025 and 30/6/2026.
Brief Project Description *	
	Briefly Describe your project. Please keep this section short as you will be able to expand on your project throughout the application

### Property/Building Ownership- Only fill in if applicable

If you plan for your project to take place inside, or on the grounds of a building, you must:

- own the property you intend to conduct an activity;
- be authorised by the owner to conduct the activity or lodge an application or be authorised to conduct such activity under the terms of your Commercial Tenancy Agreement, or;
- have a licence or permit to conduct the activity on the land.

Proof of property ownership, Commercia	al Tenancy Agreement or License/Permit
Attach a file:	

Proof of ownership such as mortgage documents or a copy of a Commercial Tenancy Agreement - you must have a minumum of twelve months remaining on the lease from the time the grant application has been lodged.

If you are not the property owner, please provide a letter of permission from the owner.  Attach a file:
Letter must include property owner's contact details and proof of ownership.
Project Contact details
* indicates a required field
Main project contact
Which organisation is the main project contact from *  ☐ Applicant organisation ☐ Auspiced organisation
Project Contact person from Applicant organisation * Title First Name Last Name
Position *
Phone Number *
Must be an Australian phone number.
Email *
Email *
Must be an email address.
Project contact person from Auspiced organisation if applicable Title First Name Last Name
Position
Phone Number

Must be an Australian phone number.

Email
Must be an email address.
Strategic Alignment
* indicates a required field
City of Parramatta's vision for heritage and visitor economy
Projects funded by the Heritage Activation Grant must align with the City of Parramatta's strategic vision for a global City.
Our visitor and heritage City vision
Global Parramatta is a place with unique cultural identity and heritage, and the home of leading artists and arts organisations. This creates an authentic point of difference for domestic and International Visitors.
Like many global cities, Global Parramatta is home to places of exceptional natural and built heritage significance, which acknowledge shared and challenging histories.
In what ways will your project contribute to realising our City vision of Heritage and Visitor Economy? *
No more than 100 words
Please indicate which of Council's 6 strategic objectives your project best aligns to? *
□ Fair- We can all benefit from the opportunities our City offers □ Accessible - we can all get to where we want to go □ Green - we care for and enjoy our environment □ Welcoming - we celebrate culture and diversity - past, present and future □ Thriving - we benefit from having a thriving CBD and local centres □ Innovative - we collaborate and champion new ideas to create a better future

### Project Questions- Tell us more

\* indicates a required field

Please choose one objective only

### Heritage Activation Grant objectives

Many sites of historical significance in Parramatta are currently under-utilised but have incredible potential to attract visitors from within and outside of the LGA. Through the Heritage Activation Grants category, visitation to these sites will be bolstered by a program of onsite visitor experiences such as tours, workshops, public installations, and performances.

The proposed project must meet one of the following objectives:

Form Preview

**OBJECTIVE 1:** Activate heritage sites and sites of historical significance within the Parramatta LGA beyond the current programming offerings

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visitor economy businesses to expand their cultural activities.
Which of the above objectives does your project meet? *  Objective 1 Objective 2 Objective 3 Objective 4 Objective 5 Must be between 1 and 5 choices selected
Geographic location
Which ward will your project be delivered? *  □ Dundas Ward (comprising whole and parts of the suburbs of Dundas, Ermington, Oatlands and Telopea)  □ Epping Ward (comprising whole and parts of the suburbs of Beecroft, Eastwood, Epping and Dundas Valley)  □ North Rocks Ward (comprising whole and parts of the suburbs of Carlingford, North Parramatta, North Rocks and Winston Hills)  □ Parramatta Ward (comprising whole and parts of the suburbs of Constitution Hill, Old Toongabbie, Parramatta, Pendle Hill, Seven Hills, Toongabbie, Northmead, Wentworthville and Westmead)  □ Parramatta CBD  If unsure please choose where you are hoping this project takes place
If the location is not listed above, please include here the location of where your project will be delivered.
Please explain why the location is outside of the Parramatta Local Government Area and who the target audience is.
Project details
What are the planned project details? *

200 Word Limit. Explain your p	roject idea, and what it inclu	des.	
What category does your  ☐ Live music ☐ Performance/entertainm ☐ Workshop or classes		h? *	
<ul><li>□ Exhibition</li><li>□ Panel or talk</li><li>□ Other</li></ul>			
What are the outcomes of	of your proposed projec	ct? *	
300 Word Limit. Examples inclucollectives? Skill building?	ude; how many people will be	e paid? Partnersł	nips between people and
How will your project de looking to engage with?		nd which aud	liences are you
200 Word Limit. Different audie needs etc.	ences can be locals, young p	eople, First Natic	ons, those with Access
Promotion			
Please list up to three ways	in which your project will	be promoted to	o the local community.
Method 1  1. Method of promotion *	Method  2. Method of promotion *	Meth	od 3 d of promotion *
Details *	Details *	Details *	

### **Supporting Documents**

\* indicates a required field

### **Project Team**

Please list the key personnel involved in the project. Please indicate each person's role. Include CVs for principal team members (optional, but preferred). Add a new line for each key team member by clicking add more.

F						

Name *	Role on project	Hours per week on project	CV of principal team members Attach a file:	

### Work Plan and Evaluation

\* indicates a required field

### Project workplan

Please complete the below project work plan that includes:

- **Project milestones** What are the key milestones/stages to be reached in order to achieve your project outcomes?
- **Tasks / Actions** What are the important tasks that need to be done in order to reach each milestone/stage?
- Performance indicator How will you measure the success of this milestone/stage?
- Timeframe- When will it be done by?

If you have any questions regarding this work plan, please contact the Community Grants team via grants@cityofparramatta.nsw.gov.au

Add a line for each new Milestone / Stage. Please complete a minimum of two Milestones and a maximum of six.

Milestone / Stage *	Tasks / Action *	Performance indicator *	Timeframe *
Milestone / Stage *	Tasks / Action *	Performance indicator *	Timeframe *

#### **Evaluation**

What does success look like? How w	ill you know if your proje	ect is successful? *
Must be no more than 150 words.		

Documenting the project is important, please list how you are planning on documenting this project?  $\mbox{*}$ 

Such as: recording attendance numbers, taking still images and video recordings of performances

### Budget

\* indicates a required field

### Other funding sources

The Heritage Activation Grant is a matched funding grant, this means that this project needs to be supported by other funding or in kind support, such as other grants, partnerships, or donation of services. In addition to the amount you are applying for from Council, we are keen to know the full costs of projects and how the other parts are funded.

What other funding, or support does this project include? *
Must be no more than 150 words

### **Project Budget**

Applicants must provide accurate financial information as part of the submission process. It is important to demonstrate that your application is financially viable, and that the project can be successfully delivered within the budget specified. Please prepare your financial information carefully, as errors may jeopardise the success of your application. Please ensure that your budget shows which parts of your project you want City of Parramatta (CoP) to fund and which parts are funded from other sources (including in-kind).

- If you are registered for GST, costings should not include GST
- If you are not registered for GST, costings should be inclusive of GST.

Explain the basis for each expenditure item, for example: Facilitator Fees @ \$40ph x 2hpw x10 weeks

Expenditure Item	To be paid for by CoP grant funds	To be paid for by other funding source	Upload quote here
			For items over \$500 please upload one quote, for quotes over \$1000 please upload two quotes
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
	\$	\$	
_	\$	\$	
_	\$	\$	
	\$	\$	

### **Project Budget Totals**

Total Project Cost *	Total requested from Council *	Total from Other Funding Source
\$	\$	\$
This number/amount is calculated.	This number/amount is calculated.	This number/amount is calculated.

### Declaration

#### Declaration

#### The Applicant:

- 1. Declares the information submitted in this application is, to the best of the Applicant's knowledge, true and presents fairly, in all material respects, the financial position of the Applicant;
- 2. Agrees to notify City of Parramatta Council as soon as the Applicant becomes aware of any changes to this information or any circumstances that may affect this application, which includes, but is not limited to, information regarding the financial viability of the Applicant
- 3. Acknowledges that City of Parramatta Council may seek further information regarding this application, if required;
- 4. Acknowledges that this is an application only the application may not necessarily result in a grant funding being awarded by City of Parramatta Council, to the Applicant; and
- 5. Understands and agrees that if the applicant is successful in making this application, which results in City of Parramatta Council awarding a grant of funding to the Applicant, that is read and agrees to the be bound by, and a party to, the Funding Agreement Standard Terms and Conditions, a copy of which you can find <a href="https://example.com/here-results-new-market

Signature of Applicant (also known as the Grantee, for the purposes of the Funding Agreement Standard Terms and Conditions), agreeing to the above Declaration:

**Note:** For the evidence of the doubt, by this signature, the Applicant will be bound by, and a part to, the Funding Agreement Standard Terms and Conditions, if the Applicant's application results in City of Parramatta Council awarding a grant of funding to the applicant.

understa	onfirm you and the above ion by clicking	0	Agreed	
If the A	pplicant is an	individ	ual	
Full Leas	al name of the A	nnlicant		
Title	First Name	Last Nar	00	
Title	i ii st ivaiiie	Last Nai		
Signator	y Name			
Print.				
Sigantur	е			
Print				

Date of Declaration
Must be a date
Must be a date.
If the Applicant is a Company
Name of Company
Insert name of company and any ABN, ACN, or ARBN.
Director's Name
Title First Name Last Name
Equivalent to a Director Position.
Signature
Print.
Date of Davidson time
Date of Declaration
Must be a date.
D: 1 (6
Director/Company Secretary Name
Print
Simulations.
Signature
Print.
Date of Declaration
Must be a date.
If the Applicant is an Incorporated Association
Full Legal name of the Applicant
Least name of incorporated acceptation and any ADM or other registration purchase
Insert name of incorporated association and any ABN or other registration number.
Public Officer's Name Title First Name Last Name
Title Tilst Name Last Name
Print.

Signature			
Print.			
Date of Declaration			
Date of Declaration			
Must be a date.			
Committee Member/Secretary	y Name		
Print.			
Signature			
Print.			
Date of Declaration			
Must be a date.			
Please remember to SUBI	MIT		
If you have completed all question remember to hit the <b>SUBMIT</b> bur questions that you have not com	tton. SmartyGrants will a		
When you hit submit you will reconfirmation, you may not have		ail. If you do	not receive this
Feedback			
To help us improve the City of Pa applying for grants with us.	irramatta Council is kee	n to hear abo	out your experience in
How did you find the online application process?			
How did you find out about the Heritage Activation Grant?			
If you accessed the City of Parramatta Council Website, did you find it			
If you spoke to a Council Officer, were they			

Any other feedback or comments?	