Queensland Fire and Emergency Services

State Emergency Service

2021-2022

SES SUPPORT GRANT

Application Form

OFFICE USE ONLY

Date Application Received

Application Number

Eligibility Assessment	Pass	🗌 Fail
RM Priority		

Applications must be lodged electronically by 30 November 2020.

Before completing this application form, refer to the Funding Guidelines available from the SES Website (<u>www.ses.qld.gov.au</u>) or QFES Grants (<u>QFES.Grants@qfes.qld.gov.au</u>).

APPLICANT INFORMATION

- 1. Complete <u>one</u> application per grant sought. Do not apply for multiple grants on the same application.
- 2. Prioritise your applications from 1 onwards (1,2,3,... with 1 being the highest priority) if you are submitting more than one application.
- 3. Consult your respective Local Controller when developing your application.
- 4. Answer each question in the space provided. Write "NA" if a question does not apply.
- 5. Stipulate all prices as GST exclusive.
- 6. Provide any further details you feel are applicable on a separate sheet. Reference and attach any further details with the application form.
- 7. QFES Grants will provide Applicants with a number for each application. Refer to this application number in all correspondence/queries.

For further information contact QFES Grants: T: 3635 3854 / E: <u>QFES.Grants@qfes.qld.gov.au</u>





Application Form

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Section 1 Applicant Details

Name of Local Govern	nment			
ABN				
Street Address				
Postal Address				
Contact Officer			Position	
Phone (bus)			Phone (mob)	
Contact officer email address			Council generic email address	
NOTE: Please supply b	oth <u>contract officer</u> and council	<u>generic ema</u>	<u>il</u> addresses.	
Section 2	Project Details			
Category	Accommodation	Uehicle	Project Prior	ity (highest = 1)
SES Group/Unit				

Project title

Executive Summary

What is the background behind the project? Are there any specific events/issues? What will the funding be used for? (200 words maximum).



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Section 3 Funding Details

Provide all funding details for the project. All costs are to be <u>GST exclusive</u>. For more information relating to funding, refer to the Project Requirements section of the Funding Guidelines.

Funding from other Organisation/Program

Aside from the Funding Details table above, has any financial support for the project been applied for or received from any other Organisation or Government Program? (If **yes**, complete below table)

Who will manage and pay for the ongoing operational and maintenance support costs of the project? (100 words maximum):

🗌 Yes 🗌 No

Program/Organisation name

Details (1)

Details (2)

Details (3)

Amount

Details below are in reference to corresponding areas above: Other State...(1), Other Contribution (2), Vehicle...(3)

Conditions

Section 4A Facility Details

Complete this section for Accommodation Grants only.

Any attachment/s supporting your application should be referenced below and securely attached with this application. Supporting documentation can include approved building plans, quotes and/or drawings of the proposed accommodation, project timetables including the proposed completion date, copies of valuation certificates etc.

General

What is the project trying to achieve and what are the benefits of the project? Take into consideration the facilities use, current condition, access to other facilities and any other information to support the funding being sought. If the facility will be shared with other non-SES activities, provide details of the percentage of use (200 words maximum).

Building fit-outs

If completing a building fit-out, list the items to be purchased and their approximate costs, below or as an attachment. Attach photographs, plans and quotes to the application where applicable.

Item

Quantity Cost (Excl. GST)

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Section 4B Vehicle D	etails		
Complete this section for Vehic	cle Grants only		
Vehicle Stocktake			
Does the SES Group have a c	designated SES vehicle?	Yes No	
Provide details of all current	vehicles allocated to the corre	esponding SES Unit:	
SES Group	Registration #	Description/type	
* Please attach a separate list i	f all vehicles do not fit in the abov	ve table.	
Current vehicle (vehicle t	o be replaced)		
Make		Model	
Year of manufacture		Odometer reading	

Registration

Replacement vehicle

.....

Year of manufacture

Model
Odometer reading
Trade in value
Model

Odometer reading

What are the accommodation options/plans for the new vehicle?

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Section 5 Activity Details		
It is recommended that this Section is completed by the relevant Local Controller		
History		
Has the SES Group/Unit been involved in an emergency or disaster activity in the last 2 years?	Yes	🗌 No
If yes , what was the emergency/disaster and how was the Group involved? (100 words maxin	num)	

What type of emergencies and/or natural disasters is the Area susceptible to? How often do the emergencies/disasters occur and what is the impact on the community (e.g. loss of life, property damage etc.)? (100 words maximum):

Current Activity

Note: Information provided in this section will be verified by Queensland Fire and Emergency Services

How many active members does the SES Group/Unit currently have?

What is the current frequency of training/meetings?

What type of training has been planned for the next 6-12 months?

How is this training relevant to your SES Group/Unit?

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Section 6 Terms and Conditions

If a funding application is successful, your organisation agrees to the following SES Support Grant terms and conditions:

- 1. QFES will provide a funding agreement to the applicant upon formal notification of funding approval. The Applicant will sign the Funding Agreement provided and will be bound by the terms and conditions outlined herein and in the Funding Guidelines.
- 2. The grant will be used solely for the purpose it was given and the project will commence within three (3) months of notification of approval of the project.
- 3. Where the grant will extend over 12 months from the time of approval notification, a written request for an extension will be sought and agreed in writing (refer *Funding Guidelines*, subsection *Variations*).
- 4. Should Queensland Fire and Emergency Services (QFES) not receive the variation request by 30 April 2018 or a Completion Certificate and supporting documentation by 30 June 2018, the funding for the project will be forfeited.
- 5. If an extension is requested and approved, the applicant must adhere to the most recent approved *Funding Guidelines* current at the time of finalising the grant.
- 6. Should the applicant undertake the project contrary to what is agreed upon under the program, QFES will cancel approval for funding and any associated funds.
- 7. The receipt and expenditure of the grant will be identified separately within the applicants accounting records so that at all times the grant is identifiable and ascertainable.
- 8. The project, or any component of the project forming part of the application, will not be started before QFES provides a

formal notification of grant approval. If, for any reason, the project is to be started before the notification, an officer from the organisation will contact QFES before the project starts. The organisation must receive written approval from QFES before proceeding (refer Funding Guidelines Section Project Requirements).

- 9. It is the responsibility of the organisation to ensure adequate insurance cover for the project, excluding the Comprehensive and Compulsory Third Party (CTP) Insurances for dedicated SES vehicles, which is covered by QFES.
- 10. The organisation will acknowledge the contribution of QFES (refer *Funding Guidelines,* subsection, *Funding Acknowledgement*).
- 11. All invoices and/or relevant documentation will be submitted in support of the claim for payment of the grant (refer *Funding Guidelines*, subsection *Payment of Funds*).
- 12. Any special conditions that are attached to the grant will be met.
- 13. All relevant records of the grant will be kept for a period of seven (7) years, and will be made available for audit at any time.
- 14. Goods and Services Tax (refer *Funding Guidelines*, subsection *Application of GST*). GST will be payable on the grant.
- 15. Failure to accord with these terms and conditions, Funding Guidelines or to comply with the purpose of funding could result in the termination or reimbursement of grant (refer Funding Guidelines).

Section 7 Applicant Declaration

I have read and agree to the terms and conditions set out in this Application Form and in the *Funding Guidelines* and agree that by signing this document that I will adhere to these terms and conditions. I declare that all information given in this application, including any attachments, is true and correct, and give permission to QFES to contact any persons or organisations in the processing of this application.

I authorise Queensland Fire and Emergency Services to release information in this application (excluding personal information) for non-commercial public information purposes.

I have the duly delegated authority to submit this application on behalf of the Chief Executive Officer and Chief Financial Officer.

Declarat	ion Officer			
Position		First Name	Last Name	
Ph		Mobile	Email	

By checking this box I hereby agree to the above declaration

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Application Form

APPLICATION CHECKLIST

Prior to submitting your application, please ensure you have completed the following checks:

- I have thoroughly read the *Funding Guidelines* and understand the application requirements.
- I have completed **ALL** required fields relevant category funding request.
- The project is yet to be started.
- The funding amounts are correct, eligible and GST exclusive.
- The Application is supported by the Chief Executive Officer (CEO), or duly authorised delegate.
- The Application is supported by the Chief Financial Officer (CFO), or duly authorised delegate.
- The Applicant Declaration is complete.
- The Application has been lodged in <u>Microsoft Word OR editable PDF</u> format via email to <u>QFES.Grants@qfes.qld.gov.au</u> by **30 November 2020.**
- Supporting documentation has been clearly identified and attached to the Application.
- The application was developed in consultation with the respective Local Controller (complete below).

Local Contr	roller
Name	
Supported	Yes No
Date	
Comments:	