# Community Insurance Grant 2024/25 - Application Form

### Community Insurance Grant

#### Overview

#### **Project Title**

Community Insurance Grant

This question is read only.

The City of Perth is home to several not-for profit neighbourhood groups who are active in their respective precincts. The groups play a vital role in contributing to the City's community and economy through various activities and initiatives.

Through the Community Insurance Grant program, the City supports not-for-profit neighbourhood groups by reimbursing insurance policy premiums, allowing the affordability of insurance and providing peace of mind for neighbourhood group members, volunteers and participants.

The Community Insurance Grant program accepts applications for the following types of insurance policies:

- · Public and Product Liability;
- Volunteer Personal Accident; and
- Association Liability.

#### **Funding Available**

Total funding per eligible neighbourhood group is limited to a maximum of \$5,000 per annum.

#### **Key Dates**

ApplicationsOpen 1 July 2024

ApplicationsClose 15 May 2025

Applications for the Community Insurance Grant program can be submitted at any time, however decisions will be made on a case-by-case basis in line with budget and strategic priorities.

This grant operates as exhaustive funding, and the City reserves the right to close the program once the available budget has been expended.

### **Documentation Required**

Applicants will need to supply the following documentation:

- A copy of your Certificate of Incorporation as a not-for-profit association.
- A copy of your constitution that clearly outlines the core function/purpose of the association.
- Evidence of previous insurance cover for a minimum of 12 months. E.g. previous insurance policy.
- Two quotes for each insurance policy to be provided from a reputable (APRA regulated issuer/ intermediary that is listed within the National Insurance Brokers Association) insurance provider;

• Evidence of an annual or on-going program of activity which seeks to engage residents and ratepayers. E.g. Calendar of events.

### Declaration

#### \* indicates a required field

### Community Insurance Grant

Please note the Eligibility Criteria for the City's Sponsorship & Grants programs before starting your application - see the relevant Guidelines on the <a href="Sponsorship and Grants">Sponsorship and Grants</a> page on the City of Perth website.

Applicants are required to meet the following eligibility criteria when applying within the Community Insurance Grant program:

- be an incorporated not-for-profit within the City of Perth local government:
  - resident or ratepayer association; or
  - neighbourhood group.
- have its members living or working in or adjacent to the neighbourhood or suburb it represents;
- be able to demonstrate a minimum of 12 months previous expenditure on appropriate insurance cover:
- be able to demonstrate an annual or on-going program of activity which seeks to engage residents and ratepayers;
- be able to demonstrate that the groups objectives allow for longevity beyond resolution of a single issue or cause;
- provide a copy of the Certificate of Incorporation for not-for-profit association; and
- have submitted a grant application prior to purchasing the insurance policy that funding is being requested for.

The City will not consider applications from:

- Commonwealth or State Government Departments;
- · a political party;
- a religious body;
- an applicant that the City considers to support, promote or facilitate violence, intolerance or discrimination;
- an employee, contractor or elected members of the City, or their immediate family;
- an applicant that has outstanding debts to the City;
- an applicant who is in legal conflict with the City;
- an applicant that has failed to provide satisfactory acquittal reporting for any previous City funding;
- an applicant that has already received City funding (including in-kind) for the same project within the same financial year;
- an applicant that conducts themselves in a way the City considered to be injurious or prejudicial to the character or interests of the City;
- an applicant who has the option to affiliate to a peak body or state/national organisation with insurance provisions (i.e., sporting clubs); or
- an applicant that is not recognised as a City of Perth community or neighbourhood association or group.

The City will not consider applications for the following projects or project expenses:

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- where the City considers the primary purpose to be political;
- that the City considers denigrate or exclude parts of the community or have an adverse effect on public health, safety, the environment or heritage;
- that request reimbursement of funds already spent;
- that are for debt reduction or operational deficits; or
- legal expenses.

The City of Perth will not support recurrent operational funding, including, but not limited to wages, salaries, or administrative overheads with the exception of eligible insurances under this program. Additional details on eligibility and other requirements are set out in the City's <a href="Sponsorship and Grants Policy">Sponsorship and Grants Policy</a>. The applicant must review the Policy prior to submitting an application for grant funding and, to the extent of any inconsistency, the Policy takes precedence over this document.

If you have any questions please contact the City of Perth Sponsorship Officer on 08 9461 3333

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### **Applicant Details**

\* indicates a required field

**Definition of Applicant** 

**Definition of 'Applicant':** the party that makes an application, including its officers, directors, employees, an auspice of an applicant, an agent, or any individual who represents, acts on behalf of, or in the interests of, the applicant.

For the purpose of this application, you will be asked to provide the details of the applicant entity and the responsible contact person.

### **Applicant Entity**

Organisation Name

Website

Must be a URL.

**Applicant Contact** 

Applicant Organisation \*

**Definition:** the organisation or individual who will enter into an agreement with the City of Perth and funds will be paid to.

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 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				
<b>Address</b> Address				

**Definition:** the person completing this form and will be responsible for communicating with the City of Perth during the application and assessment process. Applicant Contact \* Title First Name Last Name Position held in organisation Applicant contact number \* Must be an Australian phone number. Applicant contact email \* Must be an email address. Assessment Criteria \* indicates a required field **Essential Criteria** Applicants are required to demonstrate how the association will deliver benefits to the residents and ratepayers within the City of Perth local government area. \* Documentation Applicants are required to provide the following documentation: A copy of your Certificate of Incorporation as not-for-profit association \* Attach a file: A copy of your constitution that clearly outlines the core function/ purpose of the association; Attach a file:

Evidence of previous insurance cover for a minimum of 12 months. \*

Attach a file:

E.g. previous insurance policy
Which insurance are you applying for (please select as many as required)  ☐ Public and Product Liability ☐ Volunteer Personal Accident ☐ Association Liability
Two quotes for each insurance policy to be provided from a reputable (APRA regulated issuer/ intermediary that is listed within the National Insurance Brokers Association) insurance provider
Preferred Quote * Attach a file:
Secondary Quote * Attach a file:
What is total grant amount requested
Must be a dollar amount.  Applicants must provide evidence of an annual or on-going program of activity
which seeks to engage residents and ratepayers. This may be a calendar of events, programming list or similar.
Select how you wish to provide the above information: *  O Upload form  O Complete within form
Provide detail on annual or on-going program of activity which seeks to engage residents and ratepayers. *
Upload detail on annual or on-going program of activity which seeks to engage residents and ratepayers. * Attach a file:

Certification and Feedback

#### \* indicates a required field

### **Privacy Notice**

**City of Perth** pledges to respect and uphold your rights to privacy protection under the <u>Australian Privacy Principles</u> (APPs) as established under the <u>Privacy Act 1988</u> and amended by the <u>Privacy Amendment</u> (<u>Enhancing Privacy Protection</u>) <u>Act 2012</u>. To view our privacy statement, <u>click here</u>.

### Confidential Information

Please note that the City of Perth must comply with the *State Records Act 2000* (WA), *Local Government Act 1995* (WA) and other relevant legislation and regulations in regard to retaining information and making information available to the general public.

An assessment of your application will form part of the decision recommendation report which may be subject to Freedom of Information (FOI) requests.

Successful applicants may be listed on the City's website.

If you have included any confidential information as part of your application, please make this known to the Sponsorship Officer so that this information can be treated as Commercial-in-Confidence.

### **Conditions of Funding**

### **City of Perth Sponsorship and Grants Agreement**

Successful applicants will be required to accept the terms and conditions of the funding as outlined in the City of Perth's Sponsorship and Grants agreement. The Sponsorship and Grants Agreement is a standard legal document, amendments can not be made to the terms and conditions of the agreement.

Please follow the links to view the standard City of Perth <u>Sponsorship Agreement</u> or <u>Grant</u> Agreement templates.

I agree and understand that amendments can not be made to the standard

agreement *  O Yes	○ No		
Sponsorship and Grants Acquittal			
Successful applicants will be required to acquit the insurance policy for which they have been funded.			
If successful, the applicant agrees to submit the acquittal by the determined due date.			
Acquittal reports will be considered as part of future funding applications.			

l agree \*

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### Lobbying of Elected Members and Administrative Staff

Applicants or anyone representing the interests of applicants must not lobby or seek to influence the decision-making of Elected Members and administrative staff. If, during the period between submitting a funding application and a determination by Council or the CEO, an applicant or any member of the public seeks to lobby any Elected Member or administrative staff, or attempts to provide additional information, either directly or indirectly, on any matter relating to the funding application, the person/organisation will be disqualified and the sponsorship application excluded from being considered for approval.

In the event supplementary information is requested to be provided to Elected Members, please contact your Sponsorship Officer directly to disseminate this.

I	agree	*
C	)	

#### Certification

This section must be completed by an appropriately authorised person on behalf of the applicant association (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 association is approved for this funding, we will be required to accept the terms and conditions of the funding as outlined in the agreement.

I agree *	$\circ$			
Authorised Applicant Contact *	<ul><li>Individual</li><li>Organisation</li><li>Organisation Name</li></ul>			
	Title	First Name	Last Name	
Authorised Applicant Contact Position *				
Authorised Applicant Contact Primary Phone Number *	Must be an Australian phone number.			
Authorised Applicant Contact Primary Email *	Must be ar	n email address.		

### **Application Feedback**

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few minutes to provide some feedback to the City of Perth Sponsorship team so we can continually improve our application form and process.

How did you hear about this funding program?			
☐ Previous recipient	☐ City of Perth event		
☐ City of Perth website	☐ Advertising		
☐ City of Perth social media (Facebook, Twitter, LinkedIn)	☐ Industry forum or publication		
☐ City of Perth newsletter	□ Internet search		
□ Referral/word of mouth	internet search		
Please indicate how you found the online	e application process:		
○ Very easy			
○ Easy			
<ul><li>Neutral</li></ul>			
O Difficult			
<ul><li>Very Difficult</li></ul>			
How many minutes in total did it take you to complete this application?			
Must be a number.			
Estimate in minutes i.e. 1 hour = 60 minutes			
Diagram was ide the City of Bouth with your			
Please provide the City of Perth with you and/or additions to the application processonsider.			