

# Accommodation Provider EV Charger Grant Application

## Form Preview

### Before you start

#### Some things to note before you start

Before completing this application form, you should have read the [Murrindindi Shire Grants and Sponsorship Program](#) guidelines.

Incomplete applications and/or applications received after the closing date will not be considered.

#### Contact us

If you have a question about your eligibility or the grants program please email us at [grants@murrindindi.vic.gov.au](mailto:grants@murrindindi.vic.gov.au) or call us on 03 5772 0333.

### Is the business a registered provider of overnight accommodation

\* indicates a required field

#### Eligibility

**Do you have an ABN? \***

- ☐ Yes
- ☐ No

**Is this business a provider of overnight accommodation? \***

- ☐ Yes
- ☐ No

**Have no outstanding debts of any kind to Council. \***

- ☐ Yes
- ☐ No

**Does the property, where the accommodation is provided, have a green energy supply or solar power system that contributes to the property's power requirements? \***

- ☐ Yes
- ☐ No

#### Your application is not eligible

If you are unable to answer yes to the questions above, you are not eligible to apply for this grant.

Read the [Murrindindi Shire Grants and Sponsorship guidelines](#) to check what grants you are eligible for.

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Please call Council on 5772 0333 if you have any questions.

### Applicant details

\* indicates a required field

#### Business Details

**Business Name \***

Organisation Name

**Postal Address \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Address of the accommodation \***

Address

  

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

**Weblink for booking/information \***

Must be a URL.

**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	

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ATO Charity Type	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

## Applicant Project Contact

This person is responsible for

- delivering the project or activity
- managing and meeting the requirements of the agreement with Council.

\*

First Name

Last Name

**Phone Number \***

Must be an Australian phone number.

**Email \***

Must be an email address.

## Project Details

\* indicates a required field

**Project Start Date \***

Must be a date.

What date will project activities start?

**Project End Date \***

Must be a date.

What date will all project activities, including grant acquittal, be completed?

**What EV Charger will you install?**

**Who will install the EV charger?**

**What is your current occupancy rate?**

**Total Grant Requested \***

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\$

Must be a dollar amount and no more than 2000.  
What is the total grant support you are requesting in this application?

**Total Project Cost \***

\$

This number/amount is calculated.  
This is calculated from the budget page.

## Budget

### Income

Income	\$
Council grant request	\$ <input type="text"/>
Your contribution	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>

### Income Total

**Total Income Amount**

\$

This number/amount is calculated.

### Expenditure

Expenditure	\$
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
<input type="text"/>	\$ <input type="text"/>
Include in-kind contributions in your income and expenditure tables.	<input type="text"/>

### Expenditure Total

**Total Expenditure Amount**

\$

This number/amount is calculated.

### Does the Budget balance?

The totals below are automatically calculated by the system. It is a quick check to see if the budget in your application balances.

The Balance should be \$0, showing the income and expenditure amounts are equal.

Income Total

Expenditure Total

Balance

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\$

This number/amount is calculated.

\$

This number/amount is calculated.

\$

This amount should be \$0.

## Supporting documents

\* indicates a required field

Please upload documents that support your application.  
Documents are limited to 20mb in size.

### Documents

#### Quotes \*

Attach a file:

Quotes are a mandatory requirement for all grant applications.

#### Map of the premises showing the location of the carpark and charger \*

Attach a file:

#### Evidence of solar power system or green energy supply \*

Attach a file:

ie photos or utility bill

#### Details on the charger

Attach a file:

#### Any other documents

Attach a file:

## Certification and Feedback

\* indicates a required field

Privacy Statement

Personal Information

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Any personal information collected, handled, stored or disclosed about you through our online services shall be managed in accordance with the Privacy and Data Protection Act 2014 and the Health Records Act 2001.

Personal information means information or an opinion that is recorded about an individual whose identity is apparent, or can reasonably be ascertained, from the information or opinion.

### Collection and use of personal information

We only collect and record personal information that is provided directly to us that is necessary for us to perform our functions or activities.

## Certification

This section must be completed by an appropriately authorised person on behalf of the business (may be different to the contact person listed earlier in the 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 this funding is approved, we will be required to enter into an agreement with Council that outlines the terms and conditions of the grant.**

## Applicant Authorised Person

### Name \*

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

### Position \*

Position held in the applicant organisation (e.g. CEO, President, Treasurer)

### Contact Email \*

Must be an email address.

### Contact Phone Number \*

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation.

### Date \*

Must be a date.

## Feedback

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You are nearing the end of the application process. Before you review your application and click the SUBMIT button please take a few moments to provide some feedback. (If you would prefer to provide anonymous feedback, you can do so [here](#).)

### **How would you rate the ease of this online application?**

- ☐ Very easy
- ☐ Easy
- ☐ Neutral
- ☐ Difficult
- ☐ Very difficult

### **Do you have suggestions to improve our application process or form?**