# LANDCARE PROJECT FUND APPLICATION FORM (FIS004)



89 Earl Street PO Box 1145 Narrogin WA 6312

(08) 9890 0900

www.narrogin.wa.gov.au enquiries@narrogin.wa.gov.au CASHIER HOURS: 8:30am – 4:30pm MONDAY- FRIDAY

The Shire of Narrogin provides funding assistance through the Landcare Project Fund, to rural applicants within the Shire of Narrogin, for the purchase of native plants to be planted on their property. Funding is available for up to 50 % of the total spend on native plants, up to a maximum of \$5,000, where the applicant demonstrates dollar for dollar spending on native plants for the nominated project.

Applications should be submitted to the Shire by the closing date. Grants must be acquitted by 30 September each year. Click on the link for copy of the Acquittal Form.

Α	APPLICANT DETAILS							
N	Name of Applicant							
Pi	roperty Add	ress						
PI	hone							
M	lobile							
E	mail							
D	o you have	an ABN?						
	Yes	No						
Al	BN							
Λ.		ta d fa COT	0					
		tered for GST	<i>(</i>					
	Yes	Nο						

### 2. PREVIOUS LANDCARE PROJECT FUNDING.

Yes	No
	se tell us what year, a brief description of the project and the amount of Landcare Projec
received.	se tell us what year, a blief description of the project and the amount of Landcare Projec
PROJECT	
Please prov	ride the dollar amount being requested. (max \$5,000)
On what lot number)	(s) or location(s) numbers are the trees being planted? (please specify Lot/Location/Street
Are you the	owner of the property?
Are you the	owner of the property? No
Yes	
Yes	No
Yes If No, who is	No s the owner?
Yes  If No, who is  Do you have	No s the owner?  e the owner's permission to undertake this project?
Yes If No, who is	No s the owner?
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?  No
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?  No
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?  No
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?  No
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?  No
Yes  If No, who is  Do you have  Yes	No s the owner?  e the owner's permission to undertake this project?  No

How will your project benefit the land and environment?					
Estimated project start date.					
Estimated project completion date.					

#### 4. PROJECT BUDGET

Please use the sample budget below as a guide to calculate income and expenditure in the Detailed Project Budget on Page 4. Applicant/in-kind labour is to be calculated at \$25 per hour.

### Example Budget

INCOME		EXPENDITURE (please attach copies of receipts for cash expenditure)	
Amount of approved Landcare Project Funds (up to 50% of total spend on native plants)	\$3,500	Materials: Purchase of Australian Native vegetation (ie trees and shrubs)	\$7,000
Applicant's cash contribution	\$4,000	Applicants in-kind expenditure	\$8,000
Applicants in-kind contribution (please list items .i.e .labour/ materials/equipment/machinery/wages)	\$7,500	labour 300 hours @ \$25 p/h = \$7,500 fencing 50m @ \$10 p/m = \$500	
Other income		Other expenditure	\$
Total *Income	\$15,000	Total *Expenditure	\$15,000

<sup>\*</sup>Income and \*Expenditure amounts must be equal

## **Detailed Project Budget**

INCOME	<b>EXPENDITURE</b> (please attach copies of receipts for cash expenditure)		
Amount of approved Landcare Project Funds	\$ Materials: Purchase of Australian Native vegetation (ie trees and shrubs)	\$	
Applicant's cash contribution	\$ Applicants in-kind expenditure		
Applicants in-kind contribution (please list items)	\$  (please list items)	\$	
Other income	\$ Other expenditure	\$	
Total *Income	\$ Total *Expenditure	\$	

<sup>\*</sup>Total Income and Expenditure should be equal

## **Declaration by applicant**

I declare that I am authorised to submit this application and that the information presented is correct to the best of my knowledge.

Print Name		
Signature		
Date		