

2026 Quick Response Application Form

Form Preview

Surf Coast Shire Council's Quick Response Grant Application

* indicates a required field

Introduction

The Surf Coast Shire is committed to protecting your privacy and is bound by the Information Privacy Principles in the Privacy and Data Protection Act 2014 (Vic) ('PDP Act'). The personal information requested on this online form is being collected by Surf Coast Shire for the purpose of your grant application. If the personal information is not collected, Surf Coast Shire is unable to process your application and may not be able to contact you for further questions or solutions. We will not disclose your personal information without your consent, except where required or authorised to do so by law. Our privacy policy is available on our website and or contact Customer Service. If you wish to alter any of the personal information you have supplied to Surf Coast Shire, please contact us by sending an email to info@surfcoast.vic.gov.au.

Thank you for your interest in Surf Coast Shire Council's Quick Response Grants.

This grant stream is assessed on a monthly basis and remains open until funds are exhausted. Please note, for this grant stream applicant contribution is not required.

If you need an interpreter, please call the Translating and Interpreting Service (TIS National) on 131 450 and ask them to telephone the Surf Coast Shire on 03 5261 0600. Our business hours are 8.30am-5.00pm

Incomplete applications will not be considered.

Before applying

1. Read the [guidelines](#) and check your eligibility.
2. Call our Grants team on 5261 0600 to discuss your idea and ask any questions.

Eligibility - Before you commence your application

Please confirm before proceeding:

Prior to completing this application, have you reviewed the Surf Coast Shire Quick Response Grant Guidelines and contacted the Grants Officer on (03) 5261 0666 to discuss your proposal?

By submitting this application, you formally acknowledge that you have read and understood the eligibility criteria as outlined in the grant [guidelines](#).

I confirm I have read and can comply with all of the eligibility requirements listed above *

- ☐ Yes
- ☐ No - Please do not proceed.

Name Council Officer you have discussed the proposal with:

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Applicant Details

* indicates a required field

Group Name *

Organisation Name

Contact Person *

Title

First Name

Last Name

Postal Address *

Address

Suburb

State

Postcode

Must be Address Line 1, Suburb/Town, State/Province, and Postcode..

Phone Number *

Email *

Organisation Type

*

- ☐ Incorporated as a not for profit
- ☐ Unincorporated not for profit organisation (you will need to seek an Auspice)
- ☐ Individual (you will need to seek an Auspice)
- ☐ Other

If other, please specify:

Incorporation Number if required

Please enter your incorporation number

Enter your organisation's ABN

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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	

Must be an ABN.

If successful in receiving a grant, organisations that do not have an ABN will be required to complete a Statement by Supplier form. If you don't have an ABN and don't provide this form, Council may be obliged to withhold 46.5% of your grant payment.

[ATO Statement by Supplier form](#)

Please upload ATO Statement by Supplier form if applicable

Attach a file:

Auspice Details (if applicable)

Auspicings allows not-for-profit, incorporated organisations to accept grant funding on behalf of individuals or groups who are not incorporated. They will have financial responsibility for the project.

If you or your organisation is being auspicied, please provide the details of the auspicie organisation below.

Auspice Organisation

Organisation Name

Auspice Incorporation Number

Auspice Organisation 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	
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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.

Please provide a letter from your auspice organisation which states they are willing to auspice the project and accept funding on your behalf

Attach a file:

Insurance

A certificate of Public Liability Insurance (proportionate to the risk associated with the activity being undertaken) must be provided. Generally if your project is auspiced, public liability insurance is the responsibility of the applicant, not the auspice organisation. Please check with your auspice organisation.

Please attach a copy of the Certificate of Currency

Attach a file:

Financial Details

Please attach a copy of your group's latest financial report

Attach a file:

If you would like to expand on any information contained in your financial report, please do so here:

Key Project Details

* indicates a required field

What is the name of your project? *

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Which ward will your project? *

- ☐ Torquay
- ☐ Otway Ranges
- ☐ Winchelsea
- ☐ All

Please provide a brief overview of the project/event: *

Provide a short description (100 words recommended) of your project - what are you out to do?

Total Amount Requested *

Must be a dollar amount.

What is the total (grant) financial support you are requesting in this application?

Total Project Cost *

Must be a dollar amount.

Must be a dollar amount. Sum of all expenses incurred throughout the project including donations, cash contributions, in-kind contributions, other grants etc.

How many people will your project involve? *

Must be a number.

Total number - attendees, workers, volunteers.

Which of the following Surf Coast Shire Plan 2025-29 strategic directions does your project address?

- ☐ Assets and Infrastructure
- ☐ Climate and Environmental Leadership
- ☐ Community Wellbeing
- ☐ High Performing Council
- ☐ Sustainable Communities

<https://www.surfcoast.vic.gov.au/About-us/Council/Policies-plans-strategies-and-reports/Council-Plan>

Which of Council's Health and Wellbeing Plan 2025-29 priorities does your project address? Tick at least one.

- ☐ Increase Healthy Eating and Active Living
- ☐ Advance Gender Equity and Address Family Violence
- ☐ Improve Mental Health and Social Connection
- ☐ Reduce Harm from Alcohol and Vaping
- ☐ Tackles the Impact of Climate on Health

<https://www.surfcoast.vic.gov.au/About-us/Council/Policies-plans-strategies-and-reports/Council-Plan>

Assessment Questions

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Tell us about your project/event

Please answer the following questions to the best of your ability. **Assessment of your application will be largely based on the answers you give on this page of the form.** Tips on how to answer these assessment criteria are in the Quick Response Guidelines and in the hints boxes which you will see below the text boxes.

The % assigned to each question tells you the weighting of each criterion out of 100.

Applications are assessed against the grant criteria outlined in the guidelines by a panel of Council Officers.

The highest scoring projects will be fully funded and projects that score moderately may be offered partial funding.

Assessment Criteria 1 (35%) - Contributing to a thriving community and environment

What do you or your members love most about being a part of your group?

List all the ways YOUR GROUP positively impacts our community and/or environment. List who will benefit from your project? (dot points are fine)

For example - does your group create social connection? Inclusion opportunities? Health benefits? Wellbeing benefits? Benefits for the environment, culture or the arts?

Assessment Criteria 2 (35%) - Assisting the group with its purpose/function and responding to a current opportunity and/or need.

What is the purpose/function of your group?

e.g. Social connection, inclusion, health, wellbeing, culture, community arts, natural environment, climate change

How does your project/equipment respond to a current need or opportunity and assist with your current activities?

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e.g. safety issue, increasing membership

Assessment Criteria 3 (10%) - Ability to deliver project

Describe HOW you will deliver the project? E.g. timelines, tasks, who is responsible for each activity. You may wish to upload a project plan below. If purchasing new equipment how will it be stored and maintained?

Upload a project plan

Attach a file:

Assessment Criteria 4 (10%) - Positive environmental outcomes

Does your project have positive environmental outcomes?

- ☐ Yes
☐ No

List the environmental benefits (dot points fine)

e.g. reduces waste, save energy, acts on climate change, protects natural environment

Assessment Criteria 5 (10%) - Budget

Income

Include the amount you are requesting in this application.

Include any other sources of income. Make sure you tell us whether each source is confirmed or not (for example you might have another grant application in the works but that funding is not actually confirmed yet). Examples of other income could include:

- Another grant
- A cash contribution from your organisation (this could come from things like fundraising or donations)
- In Kind contribution from your organisation

In Kind contributions:

In kind support - refers to the contribution that your organisation provides in lieu of cash that covers some of the project costs. This could be volunteering time, catering, donated materials or equipment.

To CALCULATE your In Kind Contribution:

- Include an approximate value for donated materials and equipment

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- Volunteer hours = calculate volunteer hours at \$43/hour (this is usually the volunteer time actually involved in the project implementation) and skilled trades or professional services at \$150/hr (this would include things like architectural, accounting, engineering or skilled trades e.g. plumbing)

Expenditure

List every item of expenditure. Include the cost of each item. (everything that the money, or In Kind will be 'spent' on)

Please note: if you are registered for GST, all budget items are to be GST exclusive. If you are not registered for GST, all budget items are to be GST inclusive. GST registered businesses will be able to claim the GST on their invoice

Income and expenditure need to be equal. Your proposed budget must balance

To look at an example budget [Click Here](#)

Source of Income			\$ Income Amount	A Confirmed Y/N	Expenditure - itemize all expenses	\$ Expenditure Amount
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$
			\$			\$

Budget Totals

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

\$

This number/amount is calculated.

My club/group would consider partial funding of the project? *

☐ Yes

☐ No

Quotes

You must supply a quote for any equipment,

Attach a file:

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material, activity or services that the grant funds will pay for

Further Information

Council collects this data to help us analyse and review the program in the future. It has no bearing on the assessment this application.

Gender of contact person for this project

- ☐ Woman
- ☐ Man
- ☐ Non-binary
- ☐ Prefer not to say
- ☐ I use a different term (please specify below)

	Total number of Female people		Male		Gender diverse/ unspecified
	Must be a number.	Must be a number.	Must be a number.	Must be a number.	Must be a number.
Group/ Organisation membership					
Management Committee/ Board membership if applicable					

Applications are assessed during on a monthly basis until all funds are exhausted.

Any questions, contact our Grants Officer, *Terri Hannan* thannan@surfcoast.vic.gov.au or by phone on 5261 0600