

Local Heritage Grants 2024-25 - Application Form

Form Preview

Introduction

* indicates a required field

Introduction

Before you start your application please ensure that you read and understand the [Local Heritage Grants Guidelines](#).

The annual Eurobodalla Local Heritage Grants have been established by Eurobodalla Shire Council to assist property owners to carry out restoration works to listed heritage properties throughout the Shire.

There is a total grant pool of \$25,500 in the fund made up of \$19,000 from Council and \$6,500 from Heritage NSW.

This program will help preserve our shared heritage, raise awareness of the importance of heritage conservation to the community and promote the benefits of heritage generally.

If you have any questions in regards to the guidelines or eligibility criteria, please contact:

Council's Strategic Planning Officer (Support) Nardi Arnold

T: 02 4474 1226

E: nardi.arnold@esc.nsw.gov.au

Eligible projects

Eligible projects are those related to preservation work on a heritage property that is listed as a heritage item in the *Eurobodalla Local Environmental Plan 2012*.

They are also projects which involve the repair, maintenance or reinstatement of missing items on heritage buildings.

Ineligible projects

Funding will generally **not** be provided where:

- assistance is reasonably available from another source;
- substantial assistance has been previously provided;
- where the applicant has yet to complete other assisted projects; or
- where the applicant has an outstanding debt to Council.

Funds will not be made available to:

- change the external appearance of a building where the heritage significance is diminished;
- completed or retrospective projects
- assist the purchase of a heritage item; or
- relocate a heritage item or to carry out works on a relocated building.

Buildings that are owned, leased or maintained by a public authority are not eligible for funding assistance.

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I confirm that the application meets the eligibility criteria described above and I acknowledge the selection priority. *

☐ Yes

Applicant

* indicates a required field

Are you applying as an individual or an organisation? *

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Applicant Street Address *

Address

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be an Australian postcode.

Applicant Postal Address *

Address

Suburb State Postcode

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be an Australian postcode.

Applicant Daytime Phone Number *

Must be an Australian phone number.

Applicant (Organisation)

Does the organisation have an ABN? *

☐ Yes ☐ No

Applicant 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.

Applicant Contact Person *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Applicant Contact Person Position *

Applicant Contact Person Daytime Phone Number *

Must be an Australian phone number.

Applicant Contact Person Email *

Must be an email address.

Applicant Contact Person Mobile Phone Number *

Must be an Australian phone number.

Applicant (Individual)

Applicant Email *

Must be an email address.

Applicant Mobile Phone Number

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Must be an Australian phone number.

The project

* indicates a required field

Building or item details

Current use *

Former use

What was the building or item historically used for?

Heritage significance *

Word count:

Why is the item heritage listed? Search for your Heritage Item on the State Heritage Inventory at <https://www.heritage.nsw.gov.au/search-for-heritage/search-for-nsw-heritage/>. Answering this question will help you to understand the history and significance of your heritage place.

Project address

Project Address *

Address

Suburb State Postcode

Must be an Australian postcode.

Proposed works

Description of proposed works *

Provide a short description (100 words recommended) of your project - what are you trying to achieve? and how will you achieve it??

How do the proposed works preserve or enhance the heritage significance of the listed item? *

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100 words recommended

Total project cost *

\$

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

Amount you are seeking with this application *

\$

Must be a dollar amount.

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

Photos

Please upload current photos of the proposed works *

Attach a file:

A minimum of 1 file and a maximum of 6 files may be attached.

Maximum 3Mb file size

Quotes

Please upload at least two quotes for the proposed works. (If obtaining a second quote is proving difficult, please contact Council on 02 4474 1324) *

Attach a file:

A minimum of 2 files must be attached.

Declaration and Feedback

* indicates a required field

Declaration

This section must be completed by an appropriately authorised person on behalf of the applicant or applicant organisation (may be different to the contact person listed earlier in this application form).

I declare that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant is approved for this grant, they will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes ☐ No

Name of authorised person *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be a senior staff member, board member or appropriately authorised person. In the case of an individual applicant, the owner of the property.

Position *

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

Contact phone number *

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

Contact Email *

Must be an email address.

Applicant Feedback

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.

Please indicate how you found the online application process: *

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult

How many minutes did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60 minutes

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.