Form Preview

## **Eligibility Criteria**

\* indicates a required field

The purpose of these grants is to offer funding to:

- maintain and restore properties identified in the Planning and Design Code as local heritage listed places or representative places
- ensure that conservation works are undertaken in accordance with the principles identified in the Burra Charter
- promote heritage values and local heritage.

<ul><li>1. Have you read the guidelines for Built approval conditions? *</li><li>Yes</li></ul>	Heritage grant and agree with the  O No
We recommend you stop here and save your a our website. (Link)	application and read the grant guidelines on
Please check <u>website</u> to confirm your propose project is eligible for this grant.	d site is local heritage listed to ensure your
<ul><li>2. Is your proposed site local heritage lis</li><li>Yes</li></ul>	ted?  O No
We recommend you stop here and save your a Divya Bali Dogra, on 8384 0552 or email divya your project.	
<b>3. Have you contacted the Development</b> ○ Yes	Policy Planner - Built Heritage? *  O No

We recommend you stop here and save your application and contact the grants officer, Divya Bali Dogra, on 8384 0552 or email <a href="mailto:divya.balidogra@onkaparinga.sa.gov.au">divya.balidogra@onkaparinga.sa.gov.au</a> to discuss your project.

# 2023-24 Built Heritage Grant Form Preview

<b>4. What</b> <ul><li>Private</li></ul>	<b>best describes y</b> e owner	ou, the applica	nt? *  O Lessee of a local h	eritage place
Applica	ant Details			
* indicate	s a required field			
<b>5. Applic</b> Title	r <b>ant name *</b> First Name	Last Name		
<b>6. Postal</b> Address	Address *			
	wn, State/Province, I			
	ng a PO Box please o	lick on 'cant find yo	our address' and fill in the	address lines
8. Email	*			
Conser	vation Works	details		
* indicate	s a required field			
	ddress where co d Suburb/Postco		ks are proposed? (st	reet number, street
10. Pleas	se provide a brie	of description of	the proposed conse	rvation works. *
Word cou Must be no	<b>nt:</b> o more than 500 wor	ds.		
11a) Esti	imated start dat	<b>e *</b>		

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Must be a date and between 1/7/2023 and 30/6/2024.
11b) Estimated finish date *  Must be a date.
12. Certificate of Title Reference (if known)
Vol: Folio:
Please attach appropriate documentation prepared by suitable person or company (e.g. builder, designer, tradeperson, etc.)
13. Site plan identifying the location of the proposed works on the property? * Attach a file:
14. Detailed drawings including plans, elevations and sections as necessary to clearly define the scope of works? * Attach a file:
15. Methodology or specification notes about the materials and techniques to undertake the proposed work? * Attach a file:
16. Please attach an existing photograph of the building or structure where proposed works are to be undertaken? *
Attach a file:

## Funding and Budget Details

\* indicates a required field

Grants of up to \$7500 are available per application. Council does not fund retrospectively, and GST is not applicable.

The grants provide a maximum subsidy of:

- 30 per cent of the total cost of works capped at \$5000 when the total cost is less than \$20,000
- 25 per cent of the total cost of the works capped at \$7500 when the total cost is \$20,000 or more.

The total cost includes cost of material, labour and any 'in-kind' contribution.

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Please read the guidelines, this will assist when completing the application.

Please contact our Built Heritage Planner on (08) 8384 0552 or email <a href="mail@onkaparinga.sa.gov.au">mail@onkaparinga.sa.gov.au</a> if you have any questions with your application.

Please use the + button to add more lines if required

## 17. Funding expenses

Item of Expense (please include all items)	\$ value	Note - please provide detail description.
(example masonry, painting, roofing etc.)	Must be a dollar amount.	
This cost has been pre-calc include all project costs)	culated from the items yo	ou have listed above (please
		1 - What is the amount you
\$		
Quotes - must be include	ding GST	
19. Please attach a copy of company? * Attach a file:	two quotes for the work	ks from a suitable person(s) or
The costs listed should only comp satisfactorily completed, you will enable payment(s) to be made.		ing. Once the work has been or the agreed amount of subsidy to
Approvals		
* indicates a required field		
<b>20. Does your project requ ○</b> Yes	ire any council approvals ○ No	5? <b>*</b>
Please unload valid develo	nment annroval for the v	works

Form Preview

Attach a file:				
<b>20a) Have you obtained the</b> ○ Yes	ese? * ○ No	,	○ Approval pending	9
We recommend you stop here Divya Bali Dogra, on 8384 055 your project.				
We recommend you stop here Divya Bali Dogra, on 8384 055 your project.				
Additional Information	ı			
21. Do you have any furthe	r information	that is relevan	t to your applicat	ion?
Please feel free to attach any docu application checklist for assistance		will assist your app	lication (please refer	to

### **Terms & Conditions**

\* indicates a required field

### Terms and Conditions

- 1.Certify that the statements and information provided (including attachments) in this application are true and correct.
- 2.Confirm that I have read and understood the <u>Grants Guidelines</u> and agree to abide by all terms and conditions as outlined therein.
- 3. The funds provided must be used for the approved project as detailed in the grant application.
- 4.Any changes to the project that would result in funding being expended other than as detailed in the application must not be undertaken without prior written approval by the City of Onkaparinga.

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- 5. You must comply with all relevant and applicable Legislation and all lawful conditions, requirements, notices and directives issued or applicable under any such Legislation or by any Statutory Authorities.
- 6.Applicants will be responsible for obtaining any relevant approvals for example use of council land/assets, road closures and permits.
- 7.It is the responsibility of the applicant/sponsoring body to obtain all necessary insurances and the City of Onkaparinga will not be held liable for any matter arising out of this grant.
- 8. The City of Onkaparinga be given written or printed acknowledgement of the funding in correspondence, media releases, invitations and any advertising or promotional material in relation to this project.
- 9. The City of Onkaparinga will keep your personal information confidential and will only disclose it with your consent Please note that we may need to release your personal information where:

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- City of Onkaparinga are required and authorised by law to do so, or
- City of Onkaparinga have received a freedom of Information application about the application, in which case we will consult with you before releasing your personal information, or
- it is necessary to information share for promoting safety and well-being.

For more information please refer to Councils <u>Privacy Statement</u> which is available on the website.

#### Declaration

I, the applicant (individual or on behalf of an organisation), declare that the information provided in this application is true and correct. I have read, understood and agree to the Terms and Conditions of the grant as outlined above and am duly authorised to prepare and submit this application.

#### I declare \*

○ Yes

Successful applicants will be required to sign detailed Conditions of Funding tailored to their individual project.

sign or be

Declared	d by *		
Title	First Name	Last Name	
Please not	re: elected member	ars and employees of	the City of Onkaparinga are not eligible t
	ny grant applicati		the City of Offkaparinga are not eligible t