Information for Applicants

Applicants: please note

Before completing this application form, you should familiarise yourself with the application information available here, and the guidelines here.

Using SmartyGrants There is a <u>Guide for Applicants</u> available online, you can also download it in PDF. There is also an <u>Applicant FAQ</u> page available.

You do not have to complete this application in one attempt. You can save the application and come back to it another time by logging in again, to SmartyGrants.

What you will need to complete this application

Supporting material for your project such as, but not limited to the information listed below, may need to be attached to this application:

- Aerial photos
- Concept drawings

Applicant Details

* indicates a required field

Privacy Notice

We are committed to protecting your privacy and ensuring that all information provided in and arising from this application be kept confidential.

We may need to collect, use and disclose information about the person, the organisation, the project or other relevant people stipulated in this application. By completing and submitting this form, your consent is given to disclose the information contained in and arising from this application to a third party so that the third party is able to assist us in assessing the application.

If the application is successful, the project summary, name of the applying organisation and amount funded will be made public.

To view our privacy statement, go to https://www.dit.sa.gov.au/privacy.

Organisation Details Organisation Name * Organisation Name

Organis	ation ABN *	
		sed to look up the following information. Click Lookup above to ed the ABN correctly.
Informati	on from the Australi	an Business Register
ABN		
Entity nai	me	
ABN statu	us	
Entity typ	oe .	
Goods &	Services Tax (GST)	
DGR Endo	orsed	
ATO Char	rity Type	More information
ACNC Reg	gistration	
Tax Conc	essions	
Main busi	iness location	
Postal a Address Website	ddress (if differ	ent to above)
	Contact Person	
Title	First Name	Last Name
Position	held in organis	ation *
Primary	phone number	*
Backup	phone number	

Primary contact person's email address *
Project Description
* indicates a required field
3.1 Project Title
Provide a name for your project *
3.2 Project Background
Outline why the project is required. *
3.3 Location of the Project
An aerial image of the location of the boat ramp must be uploaded. * Attach a file:
List other boating facilities that are within 50km from this proposal. This information can be obtained from: http://www.dit.sa.gov.au/data/assets/pdf_file/0009/327960/SABFSP_Appendix_A_And_E_Maps.pdf *
Strategic Alignment
* indicates a required field
4.1 South Australian Boating Facilities Strategic Plan
Outline how this project links to the South Australian Boating Facilities Strategic Plan (http://www.dit.sa.gov.au/recboatingfacilities/home) as follows:
Activating key boating hubs *

Connecting key boating routes *
Improving safety outcomes *
The Level of Service will also need to be identified. This can be found in Appendix C (Boat Ramp Classification) of the South Australian Boating Facilities Strategic Plan at: http://www.dit.sa.gov.au/data/assets/pdf_file/0005/327956/SA_Boating_Facilities_Strategic_Plan.pdf
Boat Ramp Classification * 1 - Beach launch and retrieval 2A - Marine - Ramp launch and retrieval 2B - Inland Waters - Ramp launch and retrieval 3A - Marine - Ramp launch and retrieval 3B - Inland Waters - Ramp launch and retrieval 4 - Ramp launch and retrieval 5 - Ramp launch and retrieval
Benefits
* indicates a required field
5.1 Economic and Employment Benefits
List the economic and employment benefits of this project, for example, how will this benefit the local, regional and state economy? *
5.2 Tourism Benefits
Outline the tourism benefits that this proposal will have. *
5.3 Current and Proposed Usage
What are the current launchings per annum? *

What are the expected launchings per annum once the works are completed? *
Provide detail on how the above figures have been derived. For example, these are based on traffic counts over a period of time. *
Project Details
* indicates a required field
6.1 Project Overview
Outline the proposed scope of works, including relevant concept drawings (attach below). $\mbox{\ensuremath{^{\ast}}}$
Concept Drawings * Attach a file:
Attach concept/detailed drawings as appropriate
Will this facility be available for public use? * ○ Yes ○ No
6.2 Project Type
 Which of the following best describes this project? Please tick one box. * Rationalise existing facility (or facilities in the area) Maintain the existing facility Upgrade the existing facility Construct new facility
6.3 Coastal Impact/Ongoing Operational Requirements
Are there any expected/potential coastal impacts, and/or ongoing operational requirements as a result of the proposed facility? Include any preliminary advice/feedback from Coastal Protection Board, and/or coastal consultant.

6.4 Project Capital and Whole of Life Cost Estimates and Funding
6.5 Total Project Capital Cost
What is the estimated total indicative project capital cost +/-30%?
6.6 Whole of Life Cost
What are the predicted whole-of-life ongoing operation costs of the facility +/-30%, for which the council or proponent will be responsible? This should include consideration of potential remedial measures such as dredging, sand bypassing and/or erosion control.
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6.7 Funding
What is the proposed contribution you are requesting from the Facilities Fund? *
Percentage %
Where are remaining funds being sourced? Include Council contribution and if applicable other funding grants. *