

# SACCP 2026/2027 - Infrastructure

## Form Preview

### SA Car Club Program

\* indicates a required field

#### Funding streams

The State Government has committed \$2 million over four years to establish the SA Car Club Program (SACCP).

The 2026-2027 round marks the fifth funding round under the SACCP.

The SACCP offers funding through three streams:

- Program, equipment and operational stream
- Events and activities stream
- Infrastructure stream

This form is intended for applications for the **Infrastructure stream**. If you are applying for either the program, equipment and operational stream or the events and activities stream please return to the Department for Infrastructure and Transport's (DIT) SmartyGrants website and choose the correct application form.

Eligible applicants may submit applications for multiple streams. If applying for multiple streams applicants are required to submit a separate application for each stream.

The **Infrastructure stream** provides grants to improve car and motorcycle club facilities by funding upgrades of clubrooms, amenities, and safety related infrastructure.

**All applications must contribute a minimum of 50% in funding towards the project and have local council support.**

**Please confirm that you are applying for funding from the infrastructure stream \***

☐ Infrastructure stream

Applicants may only apply for one stream of funding per application.

### Program Eligibility

\* indicates a required field

#### Legal Name of Club or Federation

**Please ensure you enter the name how it appears according to the ASIC Registers website:** [https://connectonline.asic.gov.au/RegistrySearch/faces/landing/SearchRegisters.jspx?\\_adf.ctrl-state=ijte80jlp\\_4](https://connectonline.asic.gov.au/RegistrySearch/faces/landing/SearchRegisters.jspx?_adf.ctrl-state=ijte80jlp_4).

**What is the legal name of the club submitting this application? \***

Organisation Name

Please ensure your organisation name is entered as it appears on your Certificate of Incorporation. If you are unsure, please search for your organisation name under the "Organisation & Business Names" drop down option on the Search ASIC Registers website.

# SACCP 2026/2027 - Infrastructure

## Form Preview

### Eligibility Check

Note: If your club does not meet all the eligibility criteria, your application will not be considered.

**Is your club a not-for-profit car or motorcycle club or federation incorporated under the Associations Incorporations Act 1985 (SA) or does your club hold a comparable legal status? \***

☐ Yes ☐ No

**Please provide your club's incorporated registration number or details of the comparable legal status. \***

**Is your club located within South Australia? \***

☐ Yes ☐ No

**Has your club been operating for 12 months or longer? \***

☐ Yes ☐ No

Please attach most recent 12 month Statement of Financial Performance (Income and Expenditure Statement) and/or Statement of Financial Position (Balance Sheet).

***This statement must be for your most recent 12 month period.***

**Failure to provide this information correctly may result in your application being deemed ineligible.**

**If the Club's Treasurer is looking for assistance the following link is useful;**

[Guide for Community Financial Officers in Australia](#) (CA Australia, New Zealand)

**BANK STATEMENTS AND BANK RECONCILIATION REPORTS WILL NOT BE ACCEPTED.**

**File Upload \***

Attach a file:

Financial statements older than June 2025 will NOT be accepted.

**If the Financial Reports, attached are not audited or certified, I electronically certify these attached reports for consideration. \***

☐ Yes, electronically certified  
☐ No

### Club Details

\* indicates a required field

### Membership

**Please select what type of club you are \***

Other:

**What type of vehicles are eligible for membership in your club? \***

- ☐ Cars (historic)
- ☐ Cars (of any age)
- ☐ Individually Constructed Vehicles
- ☐ Left-Hand Drive
- ☐ Motorcycles (historic)
- ☐ Motorcycles (of any age)
- ☐ Street Rods
- ☐ Other

Please select all that apply.

**Other (please specify)**

**How many members of your club are female? \***

### Details

Please ensure your club's primary facility address is the physical address of the most frequently used location, for example: *Adelaide Oval, War Memorial Drive, North Adelaide 5006*.

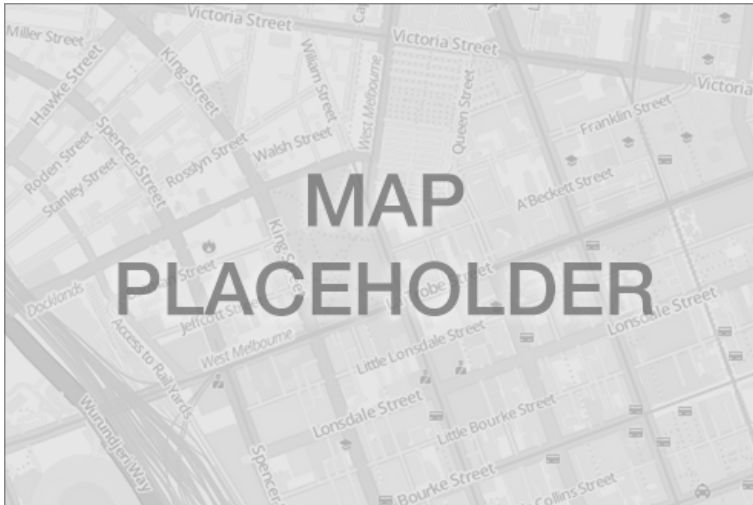
**PLEASE NOTE: Home addresses will not be accepted**

**Club's Primary Facility Address \***

Address

# SACCP 2026/2027 - Infrastructure

## Form Preview



Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

### Club's Primary Email \*

All correspondence will be directed to this email address provided

### Club's Postal Address \*

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

If organisation's postal address is a P.O Box, select (Can't find your address?) to manually input P.O box details.

### Applicant Primary Bank Account \*

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

### Name of Bank Institution \*

### Please confirm which statement is relevant to you \*

- ☐ Our club has an ABN as per the Australian Business Register website
- ☐ Our club does NOT have an ABN and therefore needs to complete the Statement by a Supplier Form

# SACCP 2026/2027 - Infrastructure

## Form Preview

### ABN details

Please ensure you have double checked that the organisation does or does not have a registered ABN according to the Australian Business Register website: <https://abr.business.gov.au/Tools/AbnLookup>

#### Club's 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 |                                  |
|---------------------------------------------------|----------------------------------|
| ABN                                               |                                  |
| Entity Name                                       |                                  |
| ABN Status                                        |                                  |
| Entity Type                                       |                                  |
| Goods & Services Tax (GST)                        |                                  |
| DGR Endorsed                                      |                                  |
| ATO Charity Type                                  | <a href="#">More information</a> |
| ACNC Registration                                 |                                  |
| Tax Concessions                                   |                                  |
| Main Business Location                            |                                  |

Please ensure your ABN matches the legal name. If you need to change your ABN details please visit: <https://abr.gov.au/For-Business,-Super-funds---Charities/Updating-or-cancelling-your-ABN/Update-your-ABN-details/>

### Only complete this question if you do not have an ABN: Statement by a Supplier Form

As you do not have an ABN, please submit a completed ATO Statement by a Supplier Form with your application, otherwise 46.5% of any approved grant may be withheld. Download the Statement by Supplier form from [the ATO](#).

#### Please upload completed Statement of Supplier Form: \*

Attach a file:

### Child Safe Environment Compliance Statement

Child protection legislation in South Australia requires certain organisations to provide a child-safe environment. All state authorities and persons or bodies who provide a service or undertake an activity that constitutes child-related work under the Child Safety (Prohibited Persons) Act 2016 must meet these obligations.

To meet the requirements under the Children and Young People (Safety) Act 2017 and the Child Safety (Prohibited Persons) Act 2016, these organisations must have a child-safe environments policy in place, meet working with children check obligations and lodge a child-safe environments compliance statement.

For further information please click [here](#).

### **Does your club or its governing body hold a Child Safe Environment Compliance Statement? \***

- ☐ Yes
- ☐ No
- ☐ Our organisation does not provide services or activities that constitutes child-related work

If your organisation does not provide services wholly or in part to members or participants under 18 years of age, choose "Not Applicable".

## Project Details and Project Eligibility

\* indicates a required field

### Infrastructure stream - What can the grant be spent on?

**All successful applicants must contribute a minimum of 50% in funding towards the project and have local council support.**

#### **Eligible projects**

All projects must evidence permission from the landowner (where the project is located).

Applicants should demonstrate how their project will achieve program objectives. Examples of eligible projects may include:

- Construction or upgrade of clubrooms and facility accessibility
- Track upgrades and safety barriers
- Training and driver education facilities
- Storage upgrades and developments
- Modifications to ensure that an existing facility meets environmental and Occupational Health and Safety regulations
- Energy saving initiatives such as the installation of solar panels and batteries, and other innovative smart technologies.

Please note that the list above includes example projects that may be funded. The list is by no means exhaustive and applications for other projects that meet the objectives of the program will be considered.

Where applicable, all projects must comply with universal design principals.

#### **Local council support**

Before commencing your application, please contact your local council. It is strongly advised that applicants contact these organisations at the earliest opportunity as it may require time to consider the request and provide the necessary support.

It is recommended applicants provide their local council with the template provided on the DIT website to complete. This document can then be submitted with the application online prior to the closing date.

#### **Ineligible projects**

The following project types are ineligible:

- Facility planning and design

# SACCP 2026/2027 - Infrastructure

## Form Preview

- Projects that currently have an active/open grant through a DIT grant program
- Projects that commence prior to a Grant Agreement being finalised
- The repair of like-for-like replacement of facilities damaged by fire, explosion, vandalism, flood, storm or other natural disasters that are covered by insurance
- Routine or cyclical maintenance works to existing facilities
- Residential buildings including caretaker residences
- The purchase of maintenance or any other equipment

### Ineligible costs

If you are successful, the DIT grant contribution cannot be used to cover the following project costs:

- Costs that are not considered labour or materials
- Costs associated with ongoing operations, such as but not limited to, electricity, water and other utilities
- Cost of landscaping for aesthetic purposes
- Costs associated with the construction or sealing of car parks or roads (excludes track upgrades)
- Insurances
- Any costs associated with preparing and submitting a funding application
- Project management fees where the project is being managed by a local council.

**I confirm that if successful, the grant will be expended on listed eligible costs. \***

☐ Yes

### Project Title \*

**Project Executive Summary - Provide a clear and concise summary of your project. We recommend completing this step after you have finished your entire application. \***

What:

How:

Why:

Must be no more than 250 words.

Describe the specific issue or need you want to address (200 words recommended)

**Provide any additional supporting documents (not Mandatory).**

Attach a file:

# SACCP 2026/2027 - Infrastructure

## Form Preview

### Project Dates

Please estimate the dates the project will begin and be completed.

#### Start Date \*

Must be a date and no earlier than 1/6/2027.

#### End Date \*

Must be a date.

### Additional Facility Information

#### What is the project category \*

- ☐ Construction or upgrade of clubrooms and facility accessibility
- ☐ Track upgrades and safety barriers
- ☐ Training and driver education facilities
- ☐ Storage upgrades and developments
- ☐ Modifications to ensure that an existing facility meets environmental and Occupational Health and Safety regulations
- ☐ Energy saving initiatives
- ☐ Other:

At least 1 choice must be selected. Projects that select 'other' may be contacted during the screening stage to ensure the project is eligible.

#### Please list the key facility features/amenities that will be delivered. \*

E.g. Upgrade of changerooms. Refurbishment of four change rooms to meet unisex standards.

#### What is the end date of your current lease/licence?

Must be a date.

Please note long term leases/licences are required for eligibility for this funding.

#### Other comments about the tenure of the facility, if applicable.

### Landowner Consent

**All projects must evidence written consent from the Landowner.**

# SACCP 2026/2027 - Infrastructure

## Form Preview

Please get your landowner to complete the following form, once they have completed it, you will need to upload it below.

[Landowner Consent Form Download](#)

If the applying organisation is the Landowner, please attach your Certificate of Title for the land.

### **Landowner Consent Form approving your proposed facility development, or Certificate of Title if applicant is the landowner: \***

Attach a file:

Failure to provide this evidence may result in your application being deemed ineligible.

## Age

### **What age group/s is your project targeted at? \***

- ☐ Under 18
- ☐ 18-25
- ☐ 26-54
- ☐ 55+
- ☐ All ages

It is an obligation under the Children and Young People (Safety) Act 2017 that all sport and recreation organisations who provide services to children under 18 must have lodged a statement with the Department of Human Services. Click [here](#) for further information.

## Project Need

\* indicates a required field

The following information may be used to assess your project against assessment criteria "Project Need". Please take the time to provide the correct uploads below.

### **How does this project address an identified need, gap or deficiency in the availability of facilities available to the community? \***

### **How will each user group of the facility benefit from the project? \***

Word count:

Must be no more than 200 words.

For the following file uploads please ensure files are named. For those wishing to upload multiple files, collate those documents into one file where possible.

# SACCP 2026/2027 - Infrastructure

## Form Preview

If too many files are attached key information may be missed during assessment.  
DO NOT attach files that are not correctly titled, they may not be opened.

### **Attach photos of your current facility to justify the need for your project.**

Attach a file:

### **Professional evidence relating to the current state of the facility (e.g. audit findings, structural reports etc.)**

Attach a file:

This upload can be used to attach any additional reports relating to the current status of the facility.

### **Alternatively, if your plans are accessible online please provide a link:**

Must be a URL.

## Consultation

All facility development should at a minimum be discussed with the membership or community in which it affects. In the following questions please discuss consultation undertaken.

E.g. A project that addresses the availability of female change rooms should be discussed with female members to ensure it meets their needs.

### **Please explain, evidence and, discuss the consultation/research you undertook during the planning phase for this project. \***

### **Evidence of consultation**

Attach a file:

E.g. Survey results, Forum minutes, Public consultation results

## Community Support

### [Non-Council Project Support Form Download](#)

Support can be provided by any organisation or individual.

Effort and priority should be given to approaching any co-located clubs, groups that share the precinct, and anyone who is listed to benefit from the project.

Ensure to save the file under the name of the organisation that is providing their support. Do not use acronyms.

# SACCP 2026/2027 - Infrastructure

## Form Preview

Please note that this is a template only, those wishing to provide support do not have to use this form if they do not want to. However, it is advised that their support letter include the details within the template at a minimum.

### Non-Council Support Forms

Attach a file:

Please use this upload to attach letters of support from anyone other than your peak body and council e.g. Letters of Support from an MP, Letters of Support from Community, Letters of Support from other organisations who will benefit from the project etc.

## Participation and Utilisation

\* indicates a required field

**Briefly explain how the project will lead to positive participation outcomes for user groups. \***

Word count:

Must be no more than 400 words.

**How will the project lead to additional programming opportunities for non-traditional participants, and/or address inclusiveness?**

Number of weekly primary active participants who will use the proposed facility

Use this table to indicate the activities of the primary users of the facilities. Where possible refer to registration systems to provide accurate figures.

Each row should relate to one of the user groups mentioned previously in your application.

| Group | Weekly users      |
|-------|-------------------|
|       | Must be a number. |
|       |                   |
|       |                   |
|       |                   |

**Secondary users of facility**

# SACCP 2026/2027 - Infrastructure

## Form Preview

Please provide any further usage figures relating to non-primary users.

E.g. Number of non-regular active participants - such as major annual events, irregular usage, or community groups which carry out activities.

### Secondary users of facility

Must be no more than 200 words.

## Quality Infrastructure

\* indicates a required field

**How will the project improve the quality, safety or standard of facilities that are available to the community.**

Must be no more than 200 words.

## Attachments

The following information may be used to assess your project against assessment the eligibility criteria. Please take the time to provide the correct uploads below.

*Please note you can upload multiple files under each question/heading. Files not titled correctly may not be opened.*

**Current Facility Plan - attach a collated file that shows the CURRENT (prior to project) facility layout: \***

Attach a file:

Annotation of these plans is advised, to provide further details directly on the plan. For example, highlighting problem areas of a surface, or the location of asbestos. This upload should directly relate to the facility you are proposing.

Example 1: for a change rooms/club room project, an aerial map of your site showing current precinct set up as well as internal floor plans.

Example 2: for a lighting project, lux chart showing current light distribution chart and lighting source location.

Example 3: for surface development, an aerial map indicating current layout including line marking.

**Precinct Map - attach an aerial image that shows the current layout of your precinct. \***

Attach a file:

# SACCP 2026/2027 - Infrastructure

## Form Preview

**Proposed Facility Plans - attach a collated file that show the PROPOSED (upon completion) facility layout. \***

Attach a file:

Attach the relevant plans for the project, these attachments must clearly show what is being proposed.

This upload should contain the proposed plans for the facility. E.g. Building Plans or Architectural Designs.

Those not applying for a building should consider attaching a satellite image of their site which clearly indicates where and what is proposed.

## Strategic Justification

\* indicates a required field

### Strategic Documents

Attach any relevant strategic planning document which identifies and prioritises this project (i.e. strategic plan, facility feasibility study, master plan, business case, or like document).

| Name of document     | Year document was published | File Upload          | If your documents are accessible online provide link: |
|----------------------|-----------------------------|----------------------|-------------------------------------------------------|
| <input type="text"/> | <input type="text"/>        | <input type="text"/> | <input type="text"/>                                  |
| <input type="text"/> | <input type="text"/>        | <input type="text"/> | <input type="text"/>                                  |
| <input type="text"/> | <input type="text"/>        | <input type="text"/> | <input type="text"/>                                  |
| <input type="text"/> | Must be a date.             | <input type="text"/> | Must be a URL.                                        |

### Peak Body - Strategic Project Support

#### [Non Council Project Support Form Download](#)

Support should be provided by any relevant peak body (where applicable)

Ensure to save the file under the name of the organisation that is providing their support. Do not use acronyms.

#### **Project Support Form \***

Attach a file:

**I give permission for any of the information provided within this application to be made available to the organisations who have provided a letter of support above.**

\*

- ☐ Yes
- ☐ No

### Local Council Support

[Local Council Project Support Form Download](#)

Applicants should contact their Local Council as soon as practicable in order to give sufficient time to discuss their project.

#### Local Council Support Form Upload

Attach a file:

**I give permission for any of the information provided within this application to be made available to the local Councils who have provided a letter of support above.**

\*

- ☐ Yes
- ☐ No

### Economic Impact

**How will the project positively impact the economy during construction and operation?**

Must be no more than 200 words.

#### Evidence of economic impact

Attach a file:

### Delivery and Maintenance

\* indicates a required field

The following questions may be used to assess your project against the eligibility criteria. Please take the time to provide clear and concise answers to the following:

Should a successful grantee be unable to meet the 12 month construction commencement timeframe, funding may be recalled.

**This project will be able to commence construction within 12 months of funding. \***

- ☐ Yes
- ☐ No
- ☐ Unsure

# SACCP 2026/2027 - Infrastructure

## Form Preview

**Should your application be successful, list the remaining steps that must be undertaken prior to commencement of construction. (e.g. community consultation, tender process, final designs): \***

**Do you have Development Approval for your project? \***

- ☐ Yes - received (attach below)
- ☐ No - lodged and awaiting decision (attach lodgement at bottom of this page)
- ☐ No - required, but not yet lodged
- ☐ No - not required (attach email of verification bottom of this page)

**List key project timelines/milestones from start to finish using dot points. \***

Must be no more than 150 words.

Approach this question as a timeline. Listing all the major steps from start til completion. E.g. Development Approval received, Ground works begin, Foundation poured etc.

**Project delivery attachments (e.g. project management plan, gantt chart, comprehensive delivery plan) \***

Attach a file:

**Who will be managing the delivery of the project? \***

- ☐ Individual
- ☐ Organisation

Organisation Name

Title      First Name      Last Name

|                      |                      |                      |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

**Position \***

**Phone Number \***

Must be an Australian phone number.

**Website (if available)**

Must be a URL.

**List any relevant project management history of the person/organisation that is delivering the project.**

# SACCP 2026/2027 - Infrastructure

## Form Preview

Must be no more than 200 words.

### Who will be managing the maintenance of the facility upon completion? \*

☐ Individual ☐ Organisation

Organisation Name

Title First Name Last Name

### What is the estimated useful lifetime of the proposed facility? \*

### What do you expect will be the annual maintenance cost for the facility?

\$0

Must be a dollar amount.

### Please discuss how the proposed facility will be maintained \*

### Attach any policies or documents relating to maintenance of facility.

Attach a file:

### How will the replacement of the facility be funded at the end of its useful life? \*

Please consider that Government funding is not always available nor guaranteed.

## Evidence of Development Approval

### Evidence of Development Approval Status Upload \*

Attach a file:

## Project Costs

\* indicates a required field

### Project Costs

Provide an itemised breakdown of the major costs associated with your project. Each of the costs below will need to be evidenced with quotes in the following question also.

Costs should be only listed if they are in direct relation to the project in which you are applying for.

- Do not include cents – round up to the next dollar.
- If your organisation is GST registered costs are to be GST exclusive.
- If your organisation is not GST registered cost are to be GST inclusive.
- It is strongly recommended that applicants seek independent legal and financial advice to determine all taxation obligations before submitting an application.

| Project Cost (Description) | \$                       | Evidence of Project Costs ( Quotes) |
|----------------------------|--------------------------|-------------------------------------|
|                            | Must be a dollar amount. |                                     |
|                            | \$0                      |                                     |
|                            | \$0                      |                                     |
|                            | \$0                      |                                     |

### Total Cost of the Proposed Project

#### Total Project Cost \*

\$

This number/amount is calculated.

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

### Amount Requested from the Department for Infrastructure and Transport

Please ensure this is considered and entered correctly.

#### Total Amount Requested \*

\$

Must be a dollar amount.

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

### Project Funding

List the other sources of funding for this project.

Please provide evidence of each of the funding sources below. Evidence could be a formal letter/email with organisational letterhead.

Evidence relating to In-kind support should be as detailed as possible. Where non-professional labour is quoted feel free to use \$25 per hour, and for professional in-kind support use \$60 per hour as a rough guide.

# SACCP 2026/2027 - Infrastructure

## Form Preview

| Funding Source | Details of Funding Source |                          | Evidence of Project Funding |
|----------------|---------------------------|--------------------------|-----------------------------|
|                |                           | Must be a dollar amount. |                             |
|                |                           | \$0                      |                             |
|                |                           | \$0                      |                             |
|                |                           | \$0                      |                             |

### Infrastructure stream - Co-contribution

Co-contributions are limited to confirmed cash contributions and in-kind materials and labour.

All applications must contribute a minimum of 50% in funding towards the project.

#### Applicants co-contributions as a percentage: \*

This number/amount is calculated.

### Insurance Eligibility

Applications for the repair of like-for-like replacement of facilities damaged by fire, explosion, vandalism, flood, storm or other natural disasters that are covered by insurance are deemed ineligible for this grant program.

**I confirm that the project is not for the repair of like-for-like replacement of facilities damaged by fire, explosion, vandalism, flood, storm or other natural disasters that are covered by insurance. \***

☐ Yes

### Total Project Costs and Project Funding Check

The following check is used to ensure the Total Project Funding matches the Total Project Cost. The fields below are automatically populated to show the Amount requested + Project Funding using the answers to the questions above. If the final check field does not equal \$0 please review your costs and funding above.

| Total Project Cost                | Funding Sources                   | SACCP Requested Funding           | Costs - Funds *                                                                                                                                                                              |
|-----------------------------------|-----------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| \$ <input type="text"/>           | \$ <input type="text"/>           | \$ <input type="text"/>           | \$ <input type="text"/>                                                                                                                                                                      |
| This number/amount is calculated. | This number/amount is calculated. | This number/amount is calculated. | This number/amount is calculated.<br>If you are applying through the Infrastructure stream this number should equal zero. If it does not, please review your Costs and Funding Tables above. |

### Any Other Information

#### Other Information

If you would like to include any further information that hasn't been covered in your application, or upload any additional documents, you can do so below.

#### Additional files to upload

Attach a file:

Attach a file:

Attach a file:

### Declaration and Submission

\* indicates a required field

#### Before you press submit

##### Declaration Instructions

1. The declaration below must be read and acknowledged by two authorised representatives of your organisation.
2. At least one representative must be a member of the Board / Management Committee or Senior Management in case of larger organisations.

##### Declaration by authorised persons

I make the following declaration:

1. I am duly authorised by the organisation to prepare and submit this application.
2. This organisation is eligible to apply for funding in accordance with the eligibility criteria outlined in this application.
3. The responses in this application and all supporting documents provided are to the best of my knowledge true and correct.
4. I understand that the Department for Infrastructure and Transport may disclose the information provided in this application to other Government agencies, Local Government, reviewers and staff assisting with the administration or promotion of State Government Grant Schemes and/or in the event of a request pursuant to the *Freedom of Information Act 1991*.

# SACCP 2026/2027 - Infrastructure

## Form Preview

5. I understand that information in relation to this project will be made public in the event that the application for funding is successful and in other circumstances as outlined in the program guidelines.

6. Where required, our project will comply with all the relevant codes, standards and applicable legislation including, but not limited to, the *Disability Discrimination Act 1992* and the *Children and Young People (Safety) Act 2017*.

### First Authorised Representative \*

Title First Name Last Name

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

This representative will be the contacted regarding this application.

### Position - Applicant Admin Contact \*

|  |
|--|
|  |
|--|

### Primary Phone Number \*

|  |
|--|
|  |
|--|

Must be an Australian phone number.

### Other Phone Number (optional)

|  |
|--|
|  |
|--|

Must be an Australian phone number.

### Primary Email \*

|  |
|--|
|  |
|--|

Must be an email address.

### Date \*

|  |
|--|
|  |
|--|

Must be today's date.

-----

### Second Authorised Representative \*

Title First Name Last Name

|  |  |  |
|--|--|--|
|  |  |  |
|--|--|--|

This contact should be the head of the organisation (President, Chair or Public Officer)

### Position - Head of Organisation \*

|  |
|--|
|  |
|--|

### Primary Phone Number \*

|  |
|--|
|  |
|--|

Must be an Australian phone number.

### Other Phone Number (optional)

|  |
|--|
|  |
|--|

Must be an Australian phone number.

### Primary Email \*

|  |
|--|
|  |
|--|

Must be an email address.

# SACCP 2026/2027 - Infrastructure

## Form Preview

**Date \***

Must be today's date.

### Feedback

If you have the time, we would appreciate some feedback.

**Have you previously applied for our grants?**

☐ Yes ☐ No

**How did you find out about this grant application?**

- |                                                        |                                                                  |                                             |
|--------------------------------------------------------|------------------------------------------------------------------|---------------------------------------------|
| <input type="checkbox"/> Council                       | <input type="checkbox"/> Facebook post                           | <input type="checkbox"/> Other Social Media |
| <input type="checkbox"/> Electorate Office             | <input type="checkbox"/> Grant Finder Website (e.g. GrantAssist) | <input type="checkbox"/> Other              |
| <input type="checkbox"/> Email from other organisation | <input type="checkbox"/> Newspaper                               |                                             |

Select as many that apply

**Did you contact a Grants Administrators for assistance?**

☐ Yes ☐ No

Did you email or telephone the grant administrators for assistance

**How satisfied were you with the assistance you received when contacting a Grant Administrators?**

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

1 = very dissatisfied to 5 = very satisfied

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

Must be a number.

An estimate number of minutes.

**Any other comments or feedback to share with us about the application process?**