SACCP 2026/2027 - Program, Equipment and Operational
Form Preview

SA Car Club Program

* indicates a required field

Confirmation of funding stream

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 **program, equipment and operational stream**. If you are applying for either the events and activities stream or the infrastructure 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 **program, equipment and operational stream** provides grants to undertake system improvements, support safety and operational equipment, build club capacity through volunteer and officials training, increase female participation rates, and assist with the costs of administering their role in the conditional registration scheme.

Please confirm that you are applying for funding from the program, equipment and operational stream *

○ Program, equipment and operational 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.

What is the legal name of the organisation 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.

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 activities that apply to this application.

Other (please specify)

How many members of your club are female? *

Must be a whole number (no decimal place).

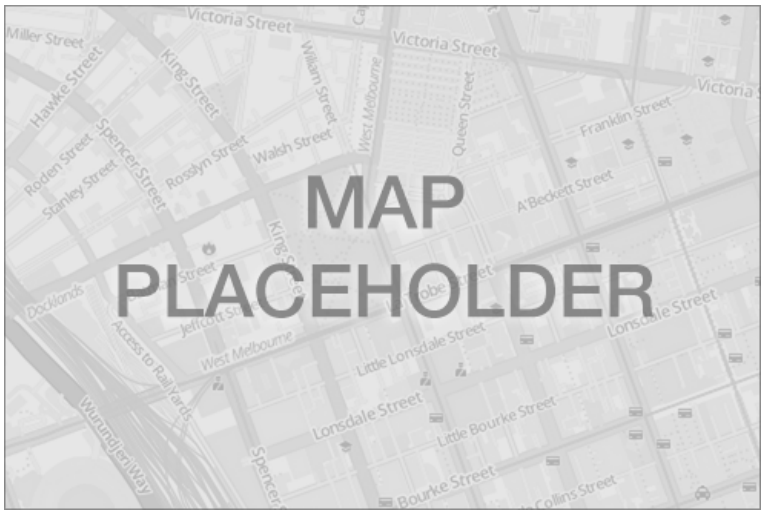
Details

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

Organisation's Primary Facility Address *

Address



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 PO Box, select 'Can't find your address?' to manually input PO box details.

Applicant Primary Bank Account *
Account Name

BSB Number Account Number

Must be a valid Australian bank account format.
Check BSB and Account numbers. Entering incorrect details may result in the wrong account being credited and the funds may not be able to be recovered

Name of Bank Institution *

Please choose 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

ABN details

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

Organisation'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	More information
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:

Club Inclusiveness

How does your club actively promote and support equality of opportunity? *

Equal opportunity is a state of fairness in which individuals are treated similarly, unhampered by artificial barriers, prejudices, or preferences.

What initiatives or strategies does your club employ to ensure inclusivity and fairness for all members? *

Application Details

* indicates a required field

Program, equipment, and operational stream - What can the grant be spent on?

You are not required at the time of this application to provide exact detail on what the grant is going to be spent on.

However, if you are successful with your application, you will be required to provide details of the expenditure of the grant.

Eligible Costs

Applicants must select one or more of the following project initiatives:

- Cost of administering their role in the conditional registration scheme
- Purchase of new safety and operational equipment.
- Tools and machinery
- Storage (e.g., cabinets and cupboards)
- Recreational items (e.g., barbeques, portable marquees)
- Promotional Materials (excluding showbags)
- Systems improvements (e.g., IT systems, software upgrades, membership portals, data collection systems).
- Website designs and updates
- Training of instructors, officials, administrators, and volunteers.
- Initiatives to increase participation of women and girls.

Ineligible Projects

Applicants cannot apply for projects outside the scope of the eligible grant projects listed above.

Ineligible Costs

If you are successful, the Department for Infrastructure and Transport grant contribution cannot be used to cover the following project costs:

- Salaries and honorariums.
- Prize money, trophies, catering and hospitality expenses.
- Purchase or leasing of vehicles and accessories.
- Costs associated with ongoing operations, such as but not limited to, electricity, water and other utilities.
- Infrastructure and events/activities projects.

- Requests for retrospective funding, where expenditure has occurred prior to the execution of a Funding Agreement.
- Any costs associated with preparing and submitting a funding application.

I confirm that if successful, the grant will be expended on listed eligible costs as per the fact sheet. *
○ Yes

Which project initiative(s) will the funding be utilised for? *
☐ Cost of administering the conditional registration scheme.
☐ Purchase of new safety and operational equipment.
☐ Tools and machinery
☐ Storage (e.g., cabinets and cupboards).
☐ Recreational items (e.g., barbeques, portable marquees)
☐ Systems improvements (e.g., IT systems, software upgrades, membership portals, data collection systems)
☐ Website designs and updates
☐ Training of instructors, officials, administrators, and volunteers.
☐ Initiatives to increase participation of women and girls.
At least 1 choice must be selected.
Please select all activities that apply to this application.

Please provide further detail on how successful grant funds would be spent *
Specify whether the funds will be used for new laptops or what training will be conducted or how it will assist in administering a role in the conditional registration scheme etc.

Please provide details on how the above items will benefit the club and the club's objectives, and how the items will help to promote strong governance and active participation in the club. *
Demonstrate the need for the program, equipment or operation and how it will promote strong governance and active participation in club life

Please provide any other supporting documents (not mandatory).
Attach a file:

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?

Cost breakdown

Expenditure	**$**
Costs of individual items for purchase, or costs associated with running a program or operation	
	$
	$
	$
	$
	$
	$
	$
	$

Cost Totals

Total Expenditure Amount *

$

This number/amount is calculated.
Must equal to or greater than total amount requested

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.*

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.

Date *

Must be today's date.

Feedback

Have you previously applied for our grants?

○ Yes ○ No

How did you find out about this grant application?

☐ Council
☐ Electorate Office
☐ Email from other organisation
☐ Facebook post
☐ Grant Finder Website (e.g. GrantAssist)
☐ Newspaper
☐ Other Social Media
☐ Other

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?