

COMMUNITY FUNDING PROGRAM

Application Form 2025-2026



**Liverpool
Plains**
Shire Council

Applicant Details

Group/Organisation:	
Contact Person:	
Postal Address:	
Phone Number:	
Email Address	

Event/Project Details

Start Date		Completion Date	
Number of Staff/Volunteers		Number of Patrons	
Description of Event/Project			
What the grant will be used for			
Requested funding amount up to \$2000	\$		

Documentation to be attached with your application

- Proof of not-for-profit status
- Copies of your organisation's financial statements
- Copies of quotes if applying for equipment or capital works
- Copy of Public Liability Insurance Certificate of Currency

Authorisation

I certify that the information given in this document is true and accurate.

Name			
Organisation			
Position		Date	
Signature			

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Event/Project Budget	
INCOME DESCRIPTION	Income
Please list all income for the event including the requested grant amount.	
LPSC Community Funding Program Grant	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL INCOME	\$
EXPENDITURE DESCRIPTION	Expenditure
Please list all expenditure for the event including the requested grant amount.	
LPSC Community Funding Program Grant	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
TOTAL EXPENDITURE	\$
Income & Expenditure must match	

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Event/Project Objectives

What benefits does this event/project bring to the community?

How will the event/project be promoted?

Please outline how you will acknowledge Liverpool Plains Shire Council's support

How will you measure, evaluate and report the event/project's success?

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How will your event/project demonstrate inclusive practices as per the Liverpool Plains Shire Council Inclusion Plan 2024-2026?

<https://www.liverpoolplains.nsw.gov.au/files/sharedassets/public/v/1/strategies-and-plans/inclusion-plan.pdf>

Please return completed application and all necessary documentation via email to:

council@liverpoolplains.nsw.gov.au

If email is unavailable, please return completed application and all necessary documentation via post to:

**Liverpool Plains Shire Council
Community Funding Program
PO Box 152
QUIRINDI NSW 2343**

OFFICE USE ONLY

Eligibility –

- **Within LPSC LGA**
- **Not-For-Profit status (evidence provided)**
- **Public liability insurance provided**
- **Demonstrated benefits of proposal**
- **Income & Expenditure match**
- **Complete the project by agreed deadline**
- **Fully completed application form**
- **Copy of organisations latest financial statement**
- **Quote provided (if applicable)**
- **Previous CFP grants acquitted (if applicable)**

PRIVACY & PERSONAL INFORMATION PROTECTION NOTICE

By completion of this form you may be providing Council with personal information. Council will collect the information only for a lawful purpose directly related to the function of Council. Information provided to Council may be used in conjunction with any of Council's business operations. We will take reasonable care not to disclose personal information. Exempt documents may come under the Government Information (Public Access) Act 2009.