Grassroots Grants in the Adelaide Park Lands Round 1 - Application Form

Form Preview

Applicant Details

* indicates a required field

Contact details

Please provide the applicant's details.

Applicant *

○ Individual ○ Organisation

Organisation Name

First Name Last Name

Contact person *

First Name Last Name

This is the person we will correspond with about this application.

Mobile Number *

Email address *

This is the address we will use to correspond with you about this application.

Postal address *

Address

For PO Box addresses, click in 'Enter a location' box and select 'Can't find your address?'

Organisation Contact Details

Organisation Primary Addressx *

Address

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

Organisation Primary Phone Number *

Must be an Australian phone number.
Please include (08) in front of the number for landlines

Organisation Primary Email

Must be an email address.

Entity details

Please see the Guidelines and FAQs for more information

Are you a legal entity? (E.g. an incorporated association, partnership, corporation/company, or a Trustee on behalf of a trust) *
- ○ Yes
- ○ No

If you are an individual or not a legal entity and your project is over $10,000, you must be sponsored by a legal entity (e.g. an incorporated association, partnership, corporation/company). See Guidelines for more information.

Do you have a sponsor? *
- ○ Yes
- ○ No
- ○ Not Applicable (project is under $10,000)

If you are an individual or not a legal entity, for projects over $10,000 you must have a sponsor to enter into the grant agreement and be responsible for managing the funding on your behalf.

You are unable to progress with this application until you arrange for a sponsor.

For further information about this requirement please contact Green Adelaide on 8372 7535

Do you have an ABN? *
- ○ Yes
- ○ No

Having an ABN means that your group will not be subject to 46.5% withholding tax on the funds provided. If your group does not have an ABN, and your grant application is successful, you will need to complete and return a 'Statement of Supplier' form with your grant agreement. Without the 'Statement of Supplier' form, 46.5% of the payment is required to be deducted and passed on to the Australian Tax Office (ATO) under the 'No ABN withholding' arrangements.

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	

Sponsor Information

* indicates a required field

Sponsor Organisation Name *
Organisation Name

Sponsor contact person *
First Name Last Name

Phone number *
Must be an Australian phone number.
Please include (08) in front of the number for landlines.

Email address *
Must be an email address.

Postal address *
Address

For PO Box addresses, click in 'Enter a location' box and select 'Can't find your address?'

Sponsor 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	

Must be an ABN.

Bank Details - sponsor

Please provide the bank details of your sponsor. This will be the bank account the funds will be paid into if successful

Sponsor Bank Account *
Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

Sponsor confirmation

Please upload signed documentation from your sponsor confirming their willingness to accept legal and financial responsibility for the project if successful

Feel free to use this template Sponsoring Organisation Agreement Letter.

*
Attach a file:

If you do not have this documentation please contact Green Adelaide to discuss the status of this confirmation

Office Bearers

Please detail below the signatories if you are successful. This needs to be the persons responsible who have delegation to execute a grant agreement for the project from this Sponsor Organisation.

Please see Guidelines and FAQs for more information on Sponsorship.

Principal Office Bearer *
First Name Last Name

Position (e.g. President, CEO, Chair, Principal) *

Mobile Number *

Email Address *

Second Office Bearer *
First Name Last Name

Position (e.g. Vice President, Treasurer, Finance Officer) *

Mobile Number *

Email Address *

Grant Details

* indicates a required field

Bank Details

Please provide the bank details you would like to be paid into if successful.

Primary Bank Account *
Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

Office Bearers

Please detail below the signatories if successful. This needs to be the people responsible who have delegation to execute a grant agreement for the project.

Principal Office Bearer *
First Name Last Name

Position (e.g. President, CEO, Chair, Principal) *

Mobile Numberx *
Must be an Australian phone number.

Email *
Must be an email address.

Second Office Bearer *
First Name Last Name

Position (e.g. Vice President, Treasurer, Finance Officer) *

Mobile Number *
Must be an Australian phone number.

Email *
Must be an email address.

Project Details

* indicates a required field

Are you requesting grant funding of between $2,000 and $5,000 GST Exclusive? *
○ Yes ○ No
This is just the amount of money you are requesting from Green Adelaide, not including other cash/in-kind contributions to the project

Have you contacted a Green Adelaide staff member? *
○ Yes ○ No
We encourage you to discuss your project with a staff member to ensure the best chance of success.

Name of staff member *

Will the proposed project operate on a not-for-profit basis? *
○ Yes
○ No
The project must not generate a financial profit, provide personal gain or other benefits to people involved.

You are unable to progress with this application unless your project operates on a not-for-profit.

For further information about this requirement please contact Green Adelaide on 8372 7535

Project title

Project title: *

Must be no more than 10 words.
Provide a short clear title for the project.

Length of time required to complete project

If successful, projects must commence on signing of grant agreement, it is anticipated that successful grantees will receive their grant agreement in September 2026

How long do you need to deliver your project? *
○ 1 year ○ 2 years ○ 3 years

Overall Project description (please note: project activities and outputs follow later in this application)

Briefly describe what your project aims to do and why it is important. Please tell us about the nature positive impact of the project. *

Word count:
Must be no more than 200 words.
This should provide those assessing the application with a good understanding of the project including the issues it focusses on, how it proposes to address them, its benefits to the region /public and any particular locations, communities, industries, etc. that are being targeted.

Please provide 'before' photos and a map of your site. In addition to providing 'before' photos now, you will be asked to provide 'after' photos at the end of your project.
Attach a file:

Further supporting documents can be included on page 11

Who are you partnering with to deliver the project?

This might include, local council, a volunteer group/community group, a school etc.

Project location

Local Government area/s *

- ☐ Adelaide City Council
- ☐ City of Burnside
- ☐ City of Charles Sturt
- ☐ City of Norwood Payneham and St Peters
- ☐ City of Prospect
- ☐ City of Unley
- ☐ Town of Walkerville
- ☐ City of West Torrens

Please provide a street address for the project or name of location

Can be a street address, coordinates etc.

Landscape Plan Priorities, activities and outputs

Activities

Please tell us what activities you will be undertaking within your project.

PLEASE SELECT ALL THAT APPLY, you can undertake multiple activities. See FAQs for more information

If you are undertaking an activity that is not listed, please include details elsewhere in the application

Activities

No more than 1 choice may be selected.

Outputs

For each of the activities you have chosen above, please select ALL of the outputs for that activity: for example:

Planting - select 2 outputs

Water management - select 2 outputs

You are required to have targets against all outputs within an activity

You can add more lines by clicking 'Add more' at the bottom of the page.

Outputs	Target	Description	Timing
For each of the activities you have chosen above please select ALL the outputs that display No more than 1 choice may be selected.	Identify a target for the output you have chosen - an estimated total for your project. e.g. 100 attendees, 200 plants Must be a number.	Please provide more information, e.g. species to be controlled/planted, types of events to be held, who is undertaking the work, how will the work be undertaken etc.	Please provide an indication of a timeframe, e.g. Autumn 2026, December 2026 etc.

Partnerships

WHO WILL YOU BE WORKING WITH

Tell us about who you will be working with to deliver this project

This might include:

- local council
- a volunteer group
- a community group
- a school
- the community, e.g. tree planting day

Add rows as you need

Note: please don't include any paid contractors

Name of partner	How are they contributing to the project
i.e. City of Mitcham, Friends of Belair NP, etc.	e.g. access to site, volunteer hours, advice, provision of materials

Please attach letters of support from your proposed project partners here:
Attach a file:

Approvals, Permits and Considerations

* indicates a required field

Is the project on public or private land? *
☐ Public
☐ Private

Do you have permission/support from the landowner/land manager (for example, the council if it is council-owned land) to undertake this project? *
○ Yes
○ No
○ Own property
This includes permission/support from your Principal/Management team if you are a school/ kindergarten/childcare centre

Permission/Support

Please upload signed documentation from the landowner/land manager confirming their permission/support of the project being undertaken, if project is successful *
Attach a file:
This MUST be obtained prior to submitting your application.

Please explain why you do not have permission/support from the landowner/land manager to undertake this project? *

Have all other relevant approvals or permits been sought or obtained (eg water affecting activities, ethics permits)? These must be obtained prior to works commencing. *

○ Yes ○ No ○ Not Applicable

Please provide details explaining what stage you are up to with seeking your approvals/ permits:

*

Please upload any approvals or permits
Attach a file:

Attach any documentation relating to any approvals that you may have obtained.

Have you considered Aboriginal Heritage and Native Title obligations? *

○ Yes ○ No ○ Not applicable

See https://nativetitle.org.au/ for more information

Please provide details.

*

Attach evidence relating to Kaurna or other Aboriginal involvement
Attach a file:

Attach evidence relating to Kaurna or other Aboriginal engagement

Applicant Capability and Capacity

* indicates a required field

Capability and capacity

The applicant (and sponsor if applicable) must have sufficient governance structures, resources and financial capacity to deliver the project and meet all contractual obligations

Please briefly outline your capability and capacity in relation to delivering this project. *

Please consider ability to meet the required reporting requirements and insurance when answering

Legacy

Explain how you will maintain this project into the future, after completion of the grant. Make sure to include any information around further plans or stages for this project. *

e.g. watering of new plants once a week, weeding of revegetated verges, regular monitoring through photo-points, installation of interpretive signage.

Risk Management

The risk assessment should consider risks that may impact your ability to deliver the project. This may include the following:

- **Administration - project lead leaves organisation**
- **Controlling pest plants - issues in hiring contractor**
- **Greening/revegetation - injury to volunteers during planting**

List the major risks associated with the project and identify the strategies you will put in place to manage them.

*Feel free to attach **relevant** risk assessments if you have them*

More lines can be added by clicking on the plus button to the right

Risk	**Management of risk**
E.G. Someone gets injured in the field	E.G. All team leaders are trained in First Aid. Will undertake a risk assessment/hazard check

Please upload a Risk Management Plan if your project is over $50,000.00
Attach a file:

Risk Management - projects <$5,000

Please detail below how you will manage risk for the delivery of your project.

Note: you don't need to address all 9 risks, only the ones that are relevant to your project

Type of risk	Explain how you will manage this risk
	E.g. water new plants 3 x per week, have a team of 3 managing the project etc.

Project Budget

* indicates a required field

Does this project build on previously funded grant projects? *

○ Yes ○ No

Please give details of previous grants

Grantor	Title	Amount ($)
		Must be a dollar amount.
		$
		$

Have you requested funding for this project from another source? *

○ Yes ○ No

Please explain *

Expenditure

Please outline the project budget in the expenditure and other funding tables below.

All amounts should be GST EXCLUSIVE

Use this table to **also** record other cash contributions, (i.e. NOT in the Grant Funding Sought column).

Please refer to guidelines on matching funding requirements for private landholders.

Please include all expenditure costs, for example: Labour/contractors, materials, consultancy, advertising costs, venue hire and catering.

Budget item	Grant Funding Sought ($)	Cash Contributions $	Cash Contribution Source	Notes
e.g. plants, weed control	MUST BE GST EXCLUSIVE Must be a dollar amount.	MUST BE GST EXCLUSIVE Must be a dollar amount.	Name of source	Please provide details of expenditure.

Total Grant Funding Sought *

$

This number/amount is calculated.
What is the total financial support you are requesting in this application?

Total Cash Contributions *

$

This number/amount is calculated.

Please attach evidence of your budget calculations (e.g. quotes, hourly rates, material prices etc.). Also use this upload feature for any financial support letters etc.

Please note, projects requesting grant funds of less than $5,000 only require quotes for items of $1,000 or more.

*

Attach a file:

Is the 'Total Grant Funding Sought' $50,000 or more? *

○ Yes ○ No

Project Brief - for projects >$50,000

Please see FAQs for more information around what is required

If project is over $50,000 please upload your Project Brief document. This can include, plans, images, concept designs, specification etc.
Attach a file:

Volunteers

Please see FAQs for more information

Number of volunteers *

Must be a number.

Total number of volunteer hours (proposed over duration of project) *

Must be a number.

Total value of volunteer hours

This number/amount is calculated.
Based on ABS rate of $50.50 per hour

Supporting Documentation

* indicates a required field

Please refer to the Guidelines for further information on what supporting documentation is required. More detail can also be found in our FAQs.

Please upload any relevant/mandatory information, this may include:

- Site drawings/designs
- Additional photos
- Map of site
- Plant list - species
- Management plan

These will support the assessment of your application.

*
Attach a file:

Additional information

If required, use this section to detail any additional information about your project you would like to share.

Declaration and Consent

* indicates a required field

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

- I certify that the application form has been checked for errors and that the applicant, and if applicable the sponsor, is supportive of the project.
- I confirm that the project sponsor has agreed to accept responsibility for the legal and financial aspects of the project, to sign the Grant Agreement and to receive funding should the application be successful.
- I consent to the release of information in this application form for commercial, publicity and public information purposes.
- I agree to comply with Green Adelaide's grant reporting requirements, which include progress and final reports and a certified statement of income and expenditure relevant to the grant to be provided by the grantee annually or on completion of the project as appropriate.
- I agree to ensure that adequate insurance is in place for the project and any assets purchased should this application be successful.

I agree *

○ Yes

Name of authorised person *

First Name | Last Name

Position

Position held in organisation (if applicable).

Date *

Must be a date.

Feedback

How did you hear about this grant round? *