



Community Partnership Program

INDIVIDUAL APPLICANT / CONTACT PERSON
Person Name:
Person Position:
Person Phone:
Person Email:
ORGANISATION DETAILS
Organisation Name:
Organisation Postal Address:
Organisation Email:
DETAILS OF ACTIVITY EVENT
Project Title:
Project Description:
Project Outcome:
How does this project align with the assessment criteria?
DECLARATION & CHECKLIST
<input type="checkbox"/> Our organisation has met the eligibility criteria and has no outstanding acquittals with the Town of Mosman Park.
<input type="checkbox"/> The proposed project has not commenced, is not for commercial gain and will take place within the Town of Mosman Park by the acquittal due date.
<input type="checkbox"/> I am the person authorised to make this application on behalf of my organisation.
<input type="checkbox"/> The information provided in this application and any attachments is true, correct and discloses an estimate as accurate as possible as the proposed income, expenditure and activities of the project.
Signature:
Date:



PROJECT FUNDING DETAILS	
CPP Application Amount:	
Total Project Cost:	
Is your organisation registered for GST: <input type="checkbox"/> Yes <input type="checkbox"/> No	
If you are registered for GST all amounts are to be GST exclusive. If you are not registered for GST all amounts are to be GST inclusive.	
PROJECT BUDGET	
EXPENSES – ITEM / DESCRIPTION	AMOUNT
Please attach quotes for any items over \$200	
TOTAL PROJECT EXPENDITURE	\$
INCOME – CASH CONTRIBUTION	AMOUNT
Town of Mosman Park	
Applicant Contribution	
TOTAL PROJECT INCOME	\$
IN KIND – NON CASH ITEMS	AMOUNT
Where a trade person is donating labour, full list of works is required and valued at \$25 per hr	
TOTAL IN KIND CONTRIBUTION	\$
TOTAL PROJECT COST	\$

