

# Application for Safe Night Precinct board grant funding

V13 June 2023



Queensland Government

<p><b>Instructions</b></p>	<p>Attach extra pages if needed.</p> <p>If you need help completing this form contact the Office of Liquor and Gaming Regulation (OLGR), Community Benefit Funds Unit on <b>1800 633 619</b> or email <b>snp-grants@justice.qld.gov.au</b></p> <p>Applications will be accepted only from Safe Night Precinct (SNP) local boards that have been prescribed in the Liquor Regulation 2002 and incorporated under the <i>Associations Incorporation Act 1981</i>. Applications will be considered from local boards that have no outstanding SNP reporting requirements.</p>
<p><b>Part A—All applicants complete every section</b></p>	
<p><b>Section 1</b> <b>Local board details</b></p>	<p>Which grant are you applying for? <input type="checkbox"/> Administration grant <input type="checkbox"/> Operational grant</p> <p>Name of local board ..... (as shown on your incorporation certificate)</p> <p>Postal address .....</p> <p>Suburb ..... State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/></p> <p>Incorporation no. .... ABN .....</p>
<p><b>Section 2</b> <b>Local board management committee details</b></p>	<p><b>President</b> name ..... Address ..... Suburb ..... State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Phone ..... Email .....</p> <p><b>Secretary</b> name ..... Address ..... Suburb ..... State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Phone ..... Email .....</p> <p><b>Treasurer</b> name ..... Address ..... Suburb ..... State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Phone ..... Email .....</p> <p><b>Contact person</b> name ..... (for enquiries about the funding submission) Address ..... Suburb ..... State <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Postcode <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> Phone ..... Email .....</p>

<p><b>Section 3</b> <b>Application description</b></p>	<p>Briefly outline what the local board is seeking funding towards</p>
<p><b>Section 4</b> <b>Benefit to local board</b></p> <p>To be completed if applying for operational grant only</p>	<p>Outline how the approval of this grant application will assist the local board to attain the objectives of:</p> <ul style="list-style-type: none"> <li>• achieving cultural change around drinking behaviour</li> <li>• promoting responsible drinking practices</li> <li>• ensuring a safer environment in and around venues.</li> </ul> <p>If the grant is approved, outline how the success of the initiative/s will be evaluated</p> <p>Is this initiative:</p> <p><input type="checkbox"/> New – Go to Section 5</p> <p><input type="checkbox"/> Extension of existing initiative—please advise:</p> <p>Do you have existing SNP Funding?</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Yes. If yes, when will the existing SNP funding be exhausted?</p>

<b>Section 5</b> <b>Requested items in order of priority</b> e.g. administration costs for evaluation report, taxi rank, security	Item from the preferred supplier	Column A Amount (GST excluded)	Column B Amount (GST included)
	<i>Security (example only)</i>	\$1000	\$1100
<b>Section 6</b> <b>Funding budget</b>	Sub total of items in <b>Section 5</b> (excluding GST) – Column A	\$	
	Less local board contribution	-\$	
	Less contribution from other sources	-\$	
	<b>Total funding sought from SNP grant (excluding GST)</b>	\$	
<b>Section 7</b> <b>Managing conflict of interest</b>	Has the local board identified a conflict of interest for the supplier/s of the service listed in <b>Section 5</b> e.g. supplier is an associate of a member of the local board/management committee? <input type="checkbox"/> No <input type="checkbox"/> Yes—how has/will the conflict of interest be managed?		



<p><b>Section 11</b> <b>Payment for administration services</b></p>	<p>If funding is being sought to pay for administration services (usually performed by a secretary), the pay rate is to be commensurate with relevant industry pay rates for comparable services. Accordingly, the local board is to consider industry pay rates as set out in: <a href="https://calculate.fairwork.gov.au/findyouraward">https://calculate.fairwork.gov.au/findyouraward</a></p> <p>Does the pay rate for administrative services align with industry pay rates?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No—Outline why the pay rate is higher or lower with respect to services provided.</p> <p>Is the provider for which funding is sought an employee or associate of a licensee?</p> <p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><b>(Note:</b> in accordance with the funding guidelines, funding cannot be provided for administration/secretarial staff where the person is an employee or associate of a licensee, local board or management committee member.</p>
<p><b>Section 12</b> <b>Financial statement</b></p>	<p>What was the date of the last annual general meeting held by the local board? <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>If an annual general meeting hasn't been held, provide reasons</p> <p><input type="checkbox"/> A copy of the last financial statement tabled by the local board at the annual general meeting is attached to this application.</p>
<p><b>Section 13</b> <b>Proposed annual budget</b> For administration grant only</p>	<p>Has the local board prepared a proposed annual budget for the administration grant?</p> <p><input type="checkbox"/> No—a copy must be prepared</p> <p><input type="checkbox"/> Yes—a copy must be attached to the application form.</p>
<p><b>Section 14</b> <b>Evaluation of approved grant</b> For operational grant only</p>	<p>A condition of all grant approvals is the requirement that the local board include an evaluation/s of the outcomes of the initiative as part of its acquittal process.</p> <p>Do you agree that if the SNP application is funded, the local board will conduct an evaluation?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

<b>Section 15</b> <b>Financial Institution</b> <b>account details</b>	Account name ..... Financial institution branch ..... BSB ..... Account no. ....
<b>Section 16</b> <b>Declaration and</b> <b>authorisation</b>	<p>By submitting this application for an SNP grant we confirm that we have read and understood the current round funding guidelines and agree to the terms and conditions attached to the grant.</p> <p>SNP grants may be audited by the OLGR Audit Unit and documents should be retained for a minimum of seven years after the grant has been acquitted.</p> <p>We certify that we are duly authorised to make the application on behalf of the local board.</p> <p>President signature..... Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Secretary/treasurer signature ..... Date <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/></p> <p>Executed under the common seal of .....  (if applicable, common seal to be placed over signatures)</p>
<b>Part B—Checklist</b>	
<b>Section 17</b> <b>Checklist</b>	<p>For both administration and operational grants:</p> <p><input type="checkbox"/> Copy of last financial statement tabled with the local board</p> <p><input type="checkbox"/> Copy of the local board's most recent bank statement.</p> <p>For administration grants only:</p> <p><input type="checkbox"/> Copy of the most recent proposed annual budget</p> <p><input type="checkbox"/> Copies of quotes for major budget items from the preferred supplier</p> <p><input type="checkbox"/> Position description for administration/secretarial staff including the hourly rate of pay and estimated hours per week.</p> <p>For operational grants only:</p> <p><input type="checkbox"/> Evidence of consultation with Public Safety Consultative Committee members, (e.g. minutes of meeting which clearly indicates the PSCC member).</p> <p><input type="checkbox"/> Copy of approval for funding from another source/s (if part funding is being provided)</p> <p><input type="checkbox"/> Copy of your preferred quote to include start and end dates for all budget items.</p>
<b>Part C—Lodgement</b>	
<b>Section 18</b> <b>Lodgement</b>	<b>By email:</b> snp-grants@justice.qld.gov.au

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