

## Community Transport Support Grant

### About The Program

The Community Transport Support grant creates opportunities for organisations and groups to access community transport. It is intended to provide a clear and consistent process for the determination of requests for monetary support to community groups or organisations, and assist to reduce social isolation and promote recreational activities within or outside Camden's LGA. Applications will be accepted throughout the year on an ad hoc basis.

The program guidelines and operating procedures ensure that monetary requests to Council are dealt with in a fair and equitable manner and are consistent with the principles of community wellbeing.

Council recognises the potential for situations to arise where one off assistance to a group can have long term benefit to residents and the community especially those involved in undertaking activities that support recreational activities requiring transport which have direct benefit to residents of Camden LGA.

### Eligibility Criteria

To be eligible for funding, an organisation must:

- Be a not for profit or charitable organisation or charity with public liability insurance of \$20,000,000 or over or;
- Be a group or unincorporated association or charity auspiced by a not for profit/ incorporated association or charity with public liability insurance of \$20,000,000 or over;
- Provide a quote from a transport provider registered for that specific purpose with ABN number and relevant licensing, registrations and insurances;
- Have acquitted any previous Camden Council grants and have no outstanding debts to Council.
- Show evidence that the group is participating in a recreational activity within or outside the LGA that supports social inclusion and reduces social isolation e.g. peer support activity.

### Ineligibility

Council does not provide grants in this round for:

- Businesses;
- Excursions that promote antisocial behaviour e.g. alcohol consumption;
- Excursions that directly contravene existing Council policy;

### Assessment Process

# Community Transport Support Grant 2024/2025

## Form Preview

Requests up to an amount of \$500 will be considered on an individual basis by a Committee comprising of the Mayor and General Manager, with an assessment and recommendation from Council Officers.

The following criteria will be applied in assessing requests:

- Purpose of the transport used;
- Previous requests made by applicant;
- Annual Council budget allowance and availability;
- Amount requested; and
- Applicant's access to alternative sources of funding.

Each applicant must submit a receipt of transportation taken. A detailed summary of all funds allocated will be reported to Council annually.

For more information please contact Community Project Officer on (02) 4645 5106 or email [grants@camden.nsw.gov.au](mailto:grants@camden.nsw.gov.au).

## Applicant Details

\* indicates a required field

### Applicant \*

Organisation Name

### Applicant Admin Contact

Individual       Organisation

Organisation Name

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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### ABN (if applicable)

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

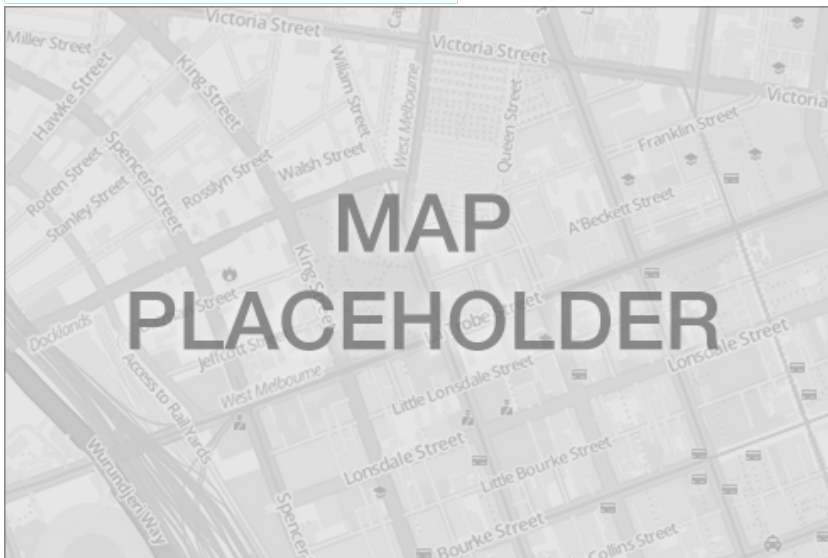
# Community Transport Support Grant 2024/2025 Form Preview

Entity type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type <a href="#">More information</a>
ACNC Registration
Tax Concessions
Main business location

Must be an ABN.

## Applicant Primary Address \*

Address

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

## Applicant Phone Number \*

Must be an Australian phone number.

## Applicant Email \*

Must be an email address.

## Applicant Website

Must be a URL.

## Applicant Bank Account

Account Name

# Community Transport Support Grant 2024/2025

## Form Preview

BSB Number

Account Number

Must be a valid Australian bank account format.

## Transport Company Engaged

\* indicates a required field

**What is the name of the company you are engaging as a transport provider for the purpose of this grant?**

**Please provide the ABN Number of the community transport provider you are engaging.**

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	<a href="#">More information</a>
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

**Where are you travelling to? \***

**Why are you travelling to this destination? \***

**How will this grant support your organisation or community? \***

# Community Transport Support Grant 2024/2025

## Form Preview

### Anticipated Start Date \*

Must be a date.

### Anticipated End Date \*

Must be a date.

## Prior Funding and Invoice

\* indicates a required field

### Have you ever been previously funded by Camden Council under this program? \*

- Yes  
 No

### If yes, when were you funded?

Must be a date.

### If your answer is yes, please provide brief details of the project.

## Transport Invoice

Please provide an invoice from the transport company you wish to engage for this purpose. The company must be registered for transport purposes, hold an ABN number and valid insurances. You will be required to provide a receipt to Council after you have travelled.

### How much funding are you requesting? \*

Must be a dollar amount.

### Transport quote \*

Attach a file:

### Transport Company Website

Must be a URL.

## Supporting Documentation and Declaration

# Community Transport Support Grant 2024/2025

## Form Preview

\* indicates a required field

### Supporting Documentation

**Evidence of Charitable status, Letter of Certificate of Incorporation details, or Statutory Declaration from unincorporated groups or services that the funding will be used for this purposes. Businesses or for profit organisations are not eligible. \***

Attach a file:

**Organisation Public Liability Insurance \***

Attach a file:

Must be for at least \$20,000,000

### Declaration

I have read and understood the information on the Donations for Charitable Purposes Program, including the eligibility criteria and to the best of my knowledge, the information provided in this application is true and correct. If I am filling out on behalf of an organisation or group, I declare that I have the authority to do so.

**Name \***

Individual       Organisation

Organisation Name

Title      First Name      Last Name