

Community Grants 2026/27 TEF Application Form

Form Preview

Introduction

Before Completing this application

1. Please read the [Community Grants Guidelines](#)
2. If required, discuss your project with the Grants and Funding Officer on 03 9209 6777 or email grants@portphillip.vic.gov.au

Completing the application

- Save regularly to avoid losing your work you can return and work on the application any time prior to submission.
- Navigate the form by clicking **Next Page** or **Previous Page** or using the index list.
- Having trouble answering a question? Look below each question for hints to help you answer the question.
- If submitting multiple applications, consider having general information e.g. description about your organisation in a word document to cut and paste into each application.
- When you submit the application, you will receive a confirmation email with a PDF copy of the submitted application.
- After submission, changes can not be made to the application.
- After submission, you can also return to **<https://portphillip.smartygrants.com.au>** at to view a copy of the submitted application.

Documentation required to be uploaded in this form:

- **A quote for the equipment** you are requesting to purchase
- **Public Liability Insurance** Certificate of Currency (to the value of \$20 million)
- If it is your organisation's first time applying for a City of Port Phillip Grant, you will need a copy of your most recent **annual report** or **annual statement/ financial statement** submitted to Consumer Affairs and a copy of your **Rules of Association**
- If you are applying through an Auspice Organisation you will need a **signed certification letter from the Auspice**

Eligibility

* indicates a required field

Eligibility Checklist

Are you a not-for-profit organisation, community group, school, or charity? *

☐ Yes ☐ No

Are you incorporated or applying through an auspice arrangement? *

☐ Yes ☐ No

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Can you provide an ABN or an auspice organisation ABN? *

- ☐ Yes ☐ No

Do you have Public Liability Insurance (to the value of \$20 million)? *

- ☐ Yes ☐ No

Does your organisation operate within the Port Phillip municipality or do you offer projects or services that benefit residents in the municipality? *

- ☐ Yes ☐ No

Has your organisation complied with all terms and conditions including the submission of a satisfactory project status and acquittal reports for all previous City of Port Phillip Grants? *

- ☐ Yes ☐ No

If you are applying for a City of Port Phillip grant for the first time, can you demonstrate financial viability? *

- ☐ Yes ☐ No ☐ Not applicable

You will need to provide a copy of your most recent Annual Report or Financial Statement submitted to Consumer Affairs and a copy of your Rules of Association

If you answered **No** to any of the above eligibility questions, please do not proceed with this application. If you have any questions, please contact the Grants & Funding Officer on 03 9209 6777 or grants@portphillip.vic.gov.au

Child Safe Standards

The City of Port Phillip has zero tolerance for child abuse. We are a committed [Child Safe organisation](#), ensuring that a culture of child safety is embedded into our practices and processes. Every child accessing Council services has the right to feel and be safe. This City embraces diversity and inclusion. Children of all age, gender, race, religion, disability, sexual orientation, family background and social background have equal rights to protection from abuse. All City of Port Phillip Councillors, employees, volunteers, contractors and community representatives must understand and act to prevent, detect, respond to and report any suspicions of child abuse, and maintain a child safe culture.

Grant projects and activities that work directly with children and young people are required to comply with legislation and regulations relating to child safety including, but not limited to, the *Working with Children Act 2005* and the Working with Children Regulations 2016 and the [Victorian Child Safe Standards \(CSS\)](#).

Successful applicants may be required to provide evidence of complying with Victorian Child Safe Standards by completing a declaration and providing copies of Working With Children Checks.

Will your program or activity work directly with children and young people? *

- ☐ Yes ☐ No

Does your program / activity comply with the Victorian Child Safe Standards? *

- ☐ Yes ☐ No

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Is your group actively working towards compliance with the Victorian Child Safe Standards? *

☐ Yes

☐ No

If you answered **No to both** of the above two questions unfortunately you are ineligible for funding under the Community Grants Program.

Victorian Government Values Statement

Funded groups are required to uphold the Victorian Government values and the Commitment to Social Cohesion, when delivering their funded projects.

Further information can be found online: [Victorian Government Values Statement | vic.gov.au](https://www.vic.gov.au/victorian-government-values-statement)

Do you agree to uphold the Victorian Government values and the Commitment to Social Cohesion? *

☐ Yes

☐ No

If you answered **No** to this question, unfortunately you are ineligible for funding under the Community Grants Program.

Applicant Organisation Details

* indicates a required field

Applicant Organisation *

Organisation Name

Primary or Meeting Address *

Address

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

Postal Address *

Address

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

Organisation Phone Number *

Must be an Australian phone number.

Primary Website

Must be a URL.

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Provide a brief description of your organisation? *

Word count:

What is its core business? 100 words or less

Does your organisation comply with the following Australian and Federal legislation? *

- ☐ Accounting and Auditing Requirements
- ☐ Equal Opportunity and Anti-Discrimination Laws
- ☐ Human Rights Laws
- ☐ Privacy, confidentiality and Freedom of Information Laws
- ☐ Registration or Accreditation of Professional Employees
- ☐ Preparation and Dissemination of Annual Reports
- ☐ Child Safe Standards

You may tick multiple answers. Please tick those that apply.

Are you applying as *

- ☐ An incorporated organisation, charity or community group
- ☐ An organisation or group with an Auspice

Contact Details

Please provide contact information for 2 members of your organisation.

Contact Person 1 (applicant or project lead) *

First Name

Last Name

Position held within organisation *

Phone Number *

Email Address *

Contact Person 2. *

First Name

Last Name

Position held in organisation *

Phone Number *

Must be an Australian phone number.

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Email Address *

Must be an email address.

Incorporated Organisations and Community Groups

What is your organisation's Australian Corporation Number (ACN)

Must be an ACN <https://abr.business.gov.au/>

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.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Must be an ABN.

Auspice Organisation Details

* indicates a required field

Auspice Organisation *

Organisation Name

Auspice Postal Address *

Address

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

Has the Auspice Organisation agreed to manage the grant? *

☐ Yes

☐ No

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**Signed certification
letter from Auspice
Organisation ***

Attach a file:

**Auspice Contact Person

First Name

Last Name

**Auspice Contact Person
Position ***

**Auspice Contact Person
Office Phone Number ***

Must be an Australian phone number.

**Auspice Contact Person
Office Email ***

Must be an email address.

**What is the auspice's
Australian Corporation
Number (ACN)**

Must be an ACN <https://abr.business.gov.au/>

Auspice 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.

ABN

Entity Name

ABN Status

Entity Type

Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

ACNC Registration

Tax Concessions

Main Business Location

Must be an ABN.

Project Overview

* indicates a required field

Project Title *

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Brief description of the project *

Word count:

Must be no more than 50 words. Please provide a brief project description that if successful we can use it to promote your project. Please include: who, what, where and when in this description.

Describe the equipment that will be purchased and how it will be used? *

Word count:

Must be no more than 100 words.

Where will the proposed project / program take place? Where will the equipment be used? *

- | | |
|--|--|
| ☐ Online | ☐ South Melbourne |
| ☐ Albert Park / Middle Park | ☐ St Kilda Road Neighbourhood |
| ☐ East St Kilda / Balaclava | ☐ St Kilda |
| ☐ Elwood/ Ripponlea | ☐ Whole of Port Phillip |
| ☐ Port Melbourne | ☐ Other: <input type="text"/> |

If your project is taking place outside of the municipality please type the suburb in 'other'

Project Proposal

* indicates a required field

Demonstrated need for the equipment

Is your project addressing: *

- ☐ An emerging need
☐ An existing need

Why is the equipment needed? *

Word count:

Must be no more than 100 words. How did you identify this need? Did you consult with the community?

What benefits will this equipment bring to the community? *

Word count:

Must be no more than 100 words.

Describe things you want the project to achieve.

Participation

What age groups will the equipment directly benefit? *

- | | |
|--|---|
| ☐ Children and Youth (0 - 17) | ☐ Older Adults (50 - 64) |
| ☐ Young Adults (12 - 25) | ☐ Seniors (65+) |

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- ☐ Middle-Aged Adults (18 - 49) ☐ All or Mixed Age Groups

Select as many as apply

Who are your targeted participants? *

- ☐ Older people ☐ First Peoples
☐ People who identify as LGBTIQ+ ☐ People at risk of or experiencing homelessness
☐ People with a disability ☐ Other:

- ☐ People from multicultural backgrounds

Select as many as apply

From which suburbs do participants come from? *

- ☐ Port Melbourne ☐ East St Kilda / Balaclava
☐ South Melbourne ☐ St Kilda Road
☐ Elwood / Ripponlea ☐ Neighbourhood
☐ Albert Park / Middle Park ☐ Whole of Port Phillip
☐ Other:

- ☐ St Kilda

You may select multiple answers.

How many people will benefit from this project? *

Must be a number.
Provide an estimate

How many will be City of Port Phillip residents? *

Must be a number.
Provide an estimate

Environmental Sustainability

How will you incorporate recycle, reduce and reuse initiatives into your project? *

Word count:

Must be no more than 100 words.

Planning and Management

*** indicates a required field**

Project Planning

How will the project/program be managed, and how will the equipment be maintained? *

Word count:

Must be no more than 200 words.

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How will you ensure that your project/program is accessible and inclusive?

*

Word count:

Must be no more than 150 words.

e.g low cost, will assist with physical access or increase participation, create safe & welcoming spaces

Evaluation

How will you know whether you have achieved the project aim and outcomes?

*

Word count:

Must be no more than 100 words.

Examples include feedback from participants and program evaluation

Council Priorities and Program Objectives

* indicates a required field

Please indicate which of the following Council Strategic Directions the project aligns with (you may select more than one):

For more detail, refer to the [Council Plan and Budget - City of Port Phillip](#)

A Healthy and Connected Community

☐

An Environmentally Sustainable and Resilient City

☐

A Safe and Liveable City

☐

How will the project align with Council's Strategic Direction/s selected above?

*

Word count:

Must be no more than 100 words.

Please indicate the strategic objective your project aligns with:

*

- ☐ Champion and embrace diversity
- ☐ Foster collaboration and mutual support within the community
- ☐ Improves the health and well-being of residents
- ☐ Provide fair and equitable access to services

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- ☐ Prepare and build resilience to the impacts of climate change
- ☐ Engages the community in enhancing environmental outcomes
- ☐ Build community leadership and capacity to respond and recover from emergencies
- ☐ Supports arts, culture, sport and recreation
- ☐ Celebrates diversity and multiculturalism

How will the purchase align with the objective? *

Word count:

Must be no more than 150 words.

Project Budget

* indicates a required field

Grant Request

Your project income budget will include details of all proposed project income e.g. ticket sales, grants etc.

Applicants will then specify which items of expenditure City of Port Phillip grant money will be used for.

There are many resources that can help you with writing a budget including [The Funding Centre](#)

An example of a grant budget is available on our [website](#)

Total cost of this project? *

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

Funding sought from Port Phillip Community Grants for the project? *

Must be a dollar amount and no more than 2000.

Does your project involve volunteers? *

☐ Yes

☐ No

Volunteers

Total estimated number of volunteer hours:

Must be a number.

Total value of volunteer contribution:

This number/amount is calculated.

\$28 per hour. Volunteer hours are to be included as in-kind contributions in both the income and expense budgets

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Project Income

Please list all income, including funding sought from City of Port Phillip, other grants, in-kind contributions, and any other income sources allocated towards this project/program.

Income	\$
Toyota Equipment Fund grant (NC)	\$
	\$
	\$
Please indicate if any other income is confirmed (C) or not confirmed (NC)	Must be a dollar amount.

Expenditure - City of Port Phillip Grant Funding Only

Please list only the items and amounts you intend to spend **City of Port Phillip grant funding on**. Other project expenditure to be provided in the next section

If successful, this table will be included in your grant agreement.

Please provide a clear breakdown of eligible items, for example

- tools such as adaptive camera or music equipment, large-button devices, ergonomic hand tools
- equipment such as adjustable work benches or raised garden beds
- multilingual resources such as books to support inclusivity
- sports equipment for people of all ages and abilities to help develop co-ordination or ball skills
- safety equipment for community workshops
- essential tools for community groups
- audio-visual equipment for community events
- cooking equipment for community classes
- sporting equipment for clubs

Expenditure	\$
	\$
	\$
	\$
	Must be a dollar amount.

Expenditure - Other Funding (Optional)

Please outline **other project costs** that will be incurred but you will **not** spend City of Port Phillip grant funding on

Expenditure	\$
	\$

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	\$
	\$

Budget Totals

The below totals are calculated from figures you have entered above.

Income - Expenditure = Balance

- The balance must equal 0 or you will not be able to submit. If your balances are not 0 please check your figures.*

Income

Total Income

\$

This number/amount is calculated.

Expenditure

Total Expenditure

\$

This number/amount is calculated.

Balance

Balance

\$

This number/amount is calculated.

Documentation

** indicates a required field*

Please upload the following information relating to your organisation:

Quote/s for equipment *

Attach a file:

Public liability insurance certificate (to the value of \$20 Million) *

Attach a file:

New applicants only: Most recent annual report or annual statement/ financial statement submitted to Consumer Affairs

Attach a file:

New applicants only: Rules of Association

Attach a file:

Any other documentation supporting the application.

Attach a file:

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Declaration

* indicates a required field

I certify that all details supplied in this application form and in the attached documents are true and correct to the best of my knowledge and that the application has been submitted with the full knowledge and agreement of the management/committee of the applicant organisation.

I have read the Toyota Equipment Fund Guidelines and understand the information contained within it forms part of the conditions of payment if this application is successful.

I agree to contact the City of Port Phillip in the event that any information regarding this application changes or is found to be incorrect.

Declaration of Contact Person *

First Name

Last Name

Do you agree with the above statement *

☐ I agree

The personal information requested on this form is being collected by Council for the Toyota Equipment Fund Program. The personal information will be used solely by Council for that primary purpose or directly related purposes. If this information is not collected the application will not be considered eligible and therefore will not be considered during the assessment process. The applicant understands that the personal information provided is for the verification of the application and correspondence purposes and that they may apply to the Council for access to and/or amendment of the information. Requests for access and or correction should be made to Council's Information Privacy Officer.

Applicant Feedback

How did you hear about the Toyota Equipment Fund?

☐ Council Website

☐ Email / Newsletter from other organisation

☐ Word of Mouth

☐ Promotional poster

☐ Email

☐ Other:

☐ Email / Newsletter from City of Port Phillip

How can the City of Port Phillip Toyota Equipment Fund program be improved?

Word count:

Must be no more than 50 words.

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Any other comments?

Word count:

Must be no more than 50 words.

Community Organisation Training and Development Requirements

Which of the following training areas would be of benefit to your organisation?

Funding / Finances

- ☐ Sources of Funding
- ☐ Grant Writing- Beginner
- ☐ Grant Writing - Advanced
- ☐ Fundraising and Sponsorship
- ☐ Crowdfunding
- ☐ Managing Finances & Budgets
- ☐ Other:

Volunteers / Staff

- ☐ Natational Standards
- ☐ Volunteer Management and Policies
- ☐ Volunteer Recruitment and Retention
- ☐ Managing Volunteers and the Law
- ☐ Engaging Young People
- ☐ Managing Staff
- ☐ De-escalation/Conflict Training
- ☐ First Aid Training
- ☐ Other:

Communications / Social Media

- ☐ Social Media
- ☐ Marketing and Promotion
- ☐ How to work with media
- ☐ Other:

Management / Governance

- ☐ Creating an Incorporated Organisation
- ☐ Governing a Community Organisation
- ☐ Leading a Child Safe Organisation
- ☐ Making Your Organisation More Inclusive / Accessible
- ☐ Financial Management for Small Organisations
- ☐ Strategic Planning
- ☐ Project Planning
- ☐ Project Evaluation
- ☐ Managing Mental Health in the Workplace
- ☐ Safety, Risk and Insurance

☐ Other:

**Committees of
Management / Boards**

- ☐ Top Legal Tips for Community Organisations
- ☐ Roles and Responsibilities
- ☐ How to Conduct an Effective Meeting
- ☐ How to Write Minutes
- ☐ Other:

Other: