

LOCAL HERITAGE ASSISTANCE FUND APPLICATION FORM



Office Use

Application Number:

Date:

Application for Financial Assistance

Please refer to guidelines before completing this application.

Applicant Details

Surname:	<input type="text"/>	First Name:	<input type="text"/>
Address:	<input type="text"/>		
Suburb:	<input type="text"/>	Postcode:	<input type="text"/>
Phone (h):	<input type="text"/>	Phone (w):	<input type="text"/>
Phone (m):	<input type="text"/>	Fax:	<input type="text"/>
Email:	<input type="text"/>		

Property

Address:	<input type="text"/>		
Suburb:	<input type="text"/>	Postcode:	<input type="text"/>
Conservation area:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Heritage item: <input type="checkbox"/> Yes <input type="checkbox"/> No
Description of proposed works:	<input type="text"/>		
<input type="text"/>			
<input type="text"/>			
<input type="text"/>			
Present use of building:	<input type="text"/>		
<input type="text"/>			

Consent of ALL Owner(s)

	Owner 1	Owner 2
Company name: (if applicable)	<input type="text"/>	<input type="text"/>
ABN/ACN: (if applicable)	<input type="text"/>	<input type="text"/>
Name:	<input type="text"/>	<input type="text"/>
Position: (must be Director of Company listed as owner)	<input type="text"/>	<input type="text"/>
Phone:	<input type="text"/>	<input type="text"/>
Signature:	<input type="text"/>	<input type="text"/>

FundingEarlier funding: Yes No If yes, year: If yes, amount received: \$ Cost of works: \$ Amount sought: \$ **Note that funding is generally on a dollar-for-dollar basis (i.e. The amount provided by the fund must not exceed the amount spent by the owner), with maximum grants limited to:**

- 50% of amount spent, if works are up to \$3,000 in value;
- \$3,000, if works are over \$3,000 in value.

Additional information submitted with this application (please tick)

- | | |
|---|--|
| <input type="checkbox"/> Evidence of costs (Invoices) | <input type="checkbox"/> Photographs before and after the works |
| <input type="checkbox"/> Plans/sketches of the works | <input type="checkbox"/> Photographs of existing structure |
| <input type="checkbox"/> Approval for works | <input type="checkbox"/> Historical background of the property (including copies of relevant historic photographs where available) |

Signature of applicant(s)

I/we, the applicant(s), hereby apply for financial assistance under the Local Heritage Assistance Fund to carry out works described in this application on the land specified in the application.

Applicant Signature(s): Capacity: Date: **Consent for use of Photographs of the Project**Name: Owner(s) Address:

I hereby give consent to Council to use before and after photographs of the heritage item for the promotion of City of Canada Bay's heritage, including the Local Heritage Assistance Fund.

Signature: Date: **Lodgement of form options**

Postal Address: City of Canada Bay Civic Centre
1A Marlborough Street, Drummoyne, NSW 2047
Locked Bag 1470 Drummoyne NSW 1470

Email: council@canadabay.nsw.gov.au
Contact: 9911 6555
Website: www.canadabay.nsw.gov.au