Form 3C - Application for Grant (ESM,DAF,EMER) 3C

The 'Form 3C – Application for DAF/Emergency Grant' is to be completed for:

- Disability Access Fund (DAF) grants, which cover 50% of capital works compliant to the Disability Access Australian Standard AS 1428 (capped at $50,000 of grant funds per congregation);
- Emergency grant funding (capped at $10,000 of grant funds per congregation) where the capital works/project is deemed to be urgent and unforeseen and the Responsible Body has no other appropriate sources of funding; or there are exceptional circumstances (it is generally not applicable to deferred maintenance or works covered through an insurance claim) ; or
- ESM Support Grant is to be completed for ESM Support Fund grants, which cover 50% of capital works required to be compliant with Maintenance Determinations, Occupancy Permits or Annual ESM Reports (capped at $50,000 of grant funds per congregation).

This form is to be completed after the 'Form 1 - Getting Started' has been submitted and Presbytery has convened a Pre-Application Meeting between Church Council, Presbytery and Property Services (please note the Pre-Application Meeting can occur by teleconference). Please forward completed form to your Presbytery. Print and complete form by hand or electronically using ONLY Adobe software, available free at *https://acrobat.adobe.com/au/en/acrobat/pdf-reader.html*
For further information *www.victas.uca.org.au/resources/property/* , E: property@victas.uca.org.au , Ph: (03) 9116 1956.

CHECKLIST:

Prepare and Sign Form 3C – Application for Grant Funding (DAF, ESM & Emergency)	☐
Signed Form 3C – Application for Grant Funding (DAF , ESM & Emergency) by Presbytery/ Authorising Body	☐
Attach Form 3H – Application to Build if DAF or Emergency Capital Works	☐
Attach financial information (if not previously submitted) if applying for Emergency grant	
· Most recent audited financial statement	☐
· Current year budget	☐
· Balance sheet/List of available financial resources (if available)	☐
· 5 year budget/ cash flow (if available)	☐

SECTION A: RESPONSIBLE BODY & GRANT REQUEST

If you require more space for your answers, please attach additional pages to this form

1. RESPONSIBLE BODY

Responsible Body Name				
Discernment Partner/ Presbytery				
Contact Person				
Position				
Email				
Phone	Ph		Mobile	
Address (Postal)				

2. GRANT REQUEST

Disability Access Fund Grant (DAF Grant)	☐	Amount Requested: $	Go to Q 3
Emergency Grant (Capital Works)	☐	Amount Requested: $	Go to Q 4
Emergency Grant (ESM)	☐	Amount Requested: $	Go to Q 5

3. DISABILITY ACCESS FUND GRANT

ATTACH 'Form 3H – Application to Build' including Contractor Quotation/Tender compliant to the Disability Access Australian Standard AS 1428 and with disability access works itemised

Please outline briefly reasons why congregation is facing financial difficulty

Please provide details of the Disability Access requirements to be done

Type of works	**TOTAL cost of itemised disability access works**	**Amount applied for (50% of total cost of itemised disability access works)**
Upgrade toilet facilities	$ (exc GST)	$ (exc GST)
Installation of ramp(s)	$ (exc GST)	$ (exc GST)
Other (please specify)	$ (exc GST)	$ (exc GST)

Go to Question 6

4. EMERGENCY GRANT – CAPITAL WORKS

Please outline briefly reasons why congregation is facing financial difficulty

Please provide details of the urgent and unforeseen capital works/project and/or the exceptional circumstances

ATTACH Form 3H – Application to Build

Total project cost (excluding GST)	$	(exc GST)
Total amount of Emergency Capital Works Grant requested	$	(exc GST)

Go to Question 6

5. EMERGENCY GRANT - ESM - Essential Safety Measures

Please outline briefly reasons why congregation is facing financial difficulty

ATTACH Form 3H – Application to Build'
including Contractor Quotation/Tender to meet compliance with remedial works.

Type of works	TOTAL cost of itemised ESM works	Amount applied for (max 50% of total cost of itemised works)
Upgrade hardware / facilities	$ (exc GST)	$ (exc GST)
Installation of ramp(s)	$ (exc GST)	$ (exc GST)
Other (please specify)	$ (exc GST)	$ (exc GST)

Describe the works to be carried out:

ATTACH - Written confirmation from an inspector re required works

SECTION B: CURRENT FINANCIAL POSITION

6. CURRENT FINANCIAL POSITION

Please complete this section if a Form 3H – Application to Build is NOT attached	
The financial details given in this question are current as at (date)	
a) Credit Funds (Current Assets)	**Amount $**
UCA Funds / U Ethical – UCA Enhanced Cash Portfolio	
UCA Funds / U Ethical – UCA Growth Portfolio	
UCA Funds / U Ethical – UCA Australian Equities Portfolio	
Building/maintenance account(s)	
Trusts and Bequests (total)	
Bank Account – Operational	
Other Investments (please specify)	
TOTAL ASSETS (A)	
b) Debts owing (Current Liabilities)	**Amount $**
UCA Funds / U Ethical	
Bank	
Individuals	
Loans and borrowings (including long-term loans)	

Other (please specify) -	
TOTAL LIABILITIES (B)	
NET POSITION (A - B)	
Of the Investments/Trusts and Bequests listed above, please indicate which ones are tied to a particular purpose and advise that purpose	

7. TREASURER CONTACT DETAILS

Name	
Position	
Email	
Phone/ Mobile	

Proceed to Section D if applying for DAF grant

SECTION C: FINANCIAL INFORMATION & BANK DETAILS

8. FINANCIAL INFORMATION

ATTACH financial information (if not previously submitted) if applying for Emergency grant

- Most recent audited financial statement ☐
- Current year budget ☐
- Balance sheet/List of available financial resources (if available) ☐
- 5 year budget/ cash flow (if available) ☐

SECTION D: Approvals & Authorising Body Comment

Responsible Body Approval

Responsible Body Name:	
Details of Approval: At a meeting held on (date), this application was approved by the:	
Church Council ☐ Congregation ☐ Other ☐	
Signed: *(type name or print, sign and scan. Note insertion of electronic signature will lock form from future edits)*	Signed: *(type name or print, sign and scan. Note insertion of electronic signature will lock form from future edits)*
Date:	Date:
Name:	Name:
Position:	Position:

Presbytery/ Authorising Body Approval

Presbytery/Authorising body:			
Details of Approval: At a meeting held on (date), this application was approved by the:			
Presbytery: ☐	Standing Committee: ☐	Delegated Committee: ☐	Other: ☐
Signed: *(type name or print, sign and scan. Note insertion of electronic signature will lock form from future edits)*		Signed: *(type name or print, sign and scan. Note insertion of electronic signature will lock form from future edits)*	
Date:		Date:	
Name:		Name:	
Position:		Position:	

Comment from Presbytery/ Authorising Body

Provide comment and/or list reasons application supported/not supported.

Please do not leave blank if Emergency Grant.