Drought Preparedness Grants Existing client ID No **Application Form**

Fund code: DPG

OR new client to ORIDA

Yes Date:

v9 14/6/2024

No

Information checklist The following information is required by QRIDA to assess your application Provided with this form: You can use your own templates or the templates available as detailed below Farm Business Resilience Plan Own format Farm Business A template is available at daf.qld.gov.au/drought-assist Resilience Plan Note: if using your own format for the Farm Business Resilience Plan it must comply with the template requirements for a Farm Business Resilience Plan as outlined in the definition of a resilience plan from the Guidelines available at grida.qld.gov.au/program/drought-preparedness-grants Financial statements and tax return/s - The provision of financial statements and tax returns Yes for the applicant and related entities are required so QRIDA can verify that you meet the Primary Producer definition. Yes Not applicable Copy of quotes to verify costs of each drought preparedness activity Supporting information Yes Not applicable Planning approvals (please refer to Section 7)

Funding under Drought Relief Assistance Scheme (DRAS)

Have you paid a deposit towards the project? If yes, what date was the deposit made?

As part of the eligibility for Drought Preparedness Grants, you must not have received either a freight subsidy under the Drought Relief Assistance Scheme or the Emergency Water Infrastructure Rebate (EWIR) under the Drought Relief Assistance Scheme in the six month period before an application is made to QRIDA for assistance under this scheme. Please indicate:

I have not received a freight subsidy or Emergency Water Infrastructure Rebate (EWIR) under the Drought Relief Assistance Scheme in the six month period before this application is made to QRIDA for assistance under this scheme.

Section 1 - Applicant detai	ls				
Applicant entity name					
Applicant entity ABN (if applicable)				GST registered? Yes	s No
Please select the borrowing entity:	Title	Surname	Given Names		Date of Birth
Sole trader					
Partnership					
Individual trustees					
Company directors					
Company	Compa	Please list the Co	mpany Director/s' details above		
Trust	Trustee	Individua	al (please provide the individ	dual trustee/s details above)	
	Trust n	' '	(please provide the Compa	ny name and the Company Directors	' details above)



Section 1 - Applicant de	etails (continued)				
Trading name					
Industry type					
Applicant contact name	е				
Landline	Fax	Mobile	Email add	dress	
telephone (including	by text or SMS or elect	sing your personal informatic tronically) about this grant pr tement on page 6 of this doc	oduct, including the p	information (including, wh rogress of your grant appli	nere permitted by law), by cation, and if your application
Road address of enter	prise:		Postal address of	enterprise: Pleas	se tick if same as road address
Town/city	State	Postcode	Town/city	State	Postcode
Accountant					
Contact person		Tol	ephone	Fax	
				Ταλ	
Firm Bank or financier		Em	nail 		
		Tol	ephone	Fax	
Contact person Bank /		Tet	ерпопе	FdX	
Financier name		Em	nail		
Branch					
Section 2 - Drought pre	eparedness				
		Preparedness Grant, a Fai in your Farm Business Res		ce Plan is required. The	activities that you are
Please detail drought p	oreparedness strateg rovide current water l	ies for your property. licenses (including water li	cence number and m	negalitres)	
Section 3 - Project/act	ivity summary				
Project/ activity summa	ary brief overview on the	type of project and intend	ed outcomes (max 1)	En words):	
ricuse provide a cicar,	brief overview on the	type of project and intend	ed bateomes (max. 13	50 Words).	

Section 4 - Project activity milestones

Please identify the major activities you wish to undertake, the total cost for each, the timeframe for completion and the milestones you wish to achieve over the life of the project. Please note projects should commence within 90 days and should be completed with approved funding drawn within six months from entering into a letter of offer. An example project has been completed for your reference.

Example Project Activity	ample Project Activity Milestone								
Activity	Increase watering points to 2.5km distance across 8 paddocks								
Description	Put in infrastructure for the 8 troughs and water points in the paddocks 8 troughs 25km of poly pipe Install 8 solar pumps								
Total cost	Grant contribution		\$20,000	A -41: 14: -41: E		Start	date	01/03/2022	
(Grant contribution is 25% up to \$50,000)	Applicant contribu	tion	\$60,000		Activity timeframe	End d	date	01/09/2022	
Project Activity Milestor	ne One								
Activity									
Address project will take place on	Road address					L	.GA		
	Lot			Plan		A	Area (ha)		
Description									
Total cost	Grant contribution				Activity timoframo	Start	t date		
(Grant contribution is 25% up to \$50,000)	Applicant contribution Activity timeframe Er				End d	End date			
Project Activity Mileston	ne Two								
Activity									
Address project will take place on	Road address					L	.GA		
·	Lot			Plan		A	Area (ha)		
Description									
Total cost (Grant contribution is 25% up	Grant contribution	1			Activity timeframe		t date		
to \$50,000)	Applicant contribu	tion			Activity timename	End d	date		
Project Activity Mileston	ne Three								
Activity									
Address project will take place on	Road address					L	.GA		
,	Lot			Plan		A	Area (ha)		
Description									
Total cost (Grant contribution is 25% up	Grant contribution				A still to time f	Start	date		
to \$50,000)	Applicant contribution			Activity timeframe	End d	date			

Section 5 - Project costings

Please provide a detailed list of the project costs. All amounts should be excluding GST. Itemised costs may include capital expenditure, plant and equipment, consumables used for the project etc. Please also provide full details of how the project will be funded. Applicants are reminded the maximum grant amount is \$50,000.

Please attach detailed project costs.

Note: the total cost of the proposal and total amount of funding required must be equal.

Cost (\$)	Funding source
	Grant Funding re
	Applicant's con
	Partnership fun
	Other (please s
	TOTAL (G

Funding source	Amount (\$)
Grant Funding requested	
Applicant's contribution	
Partnership funding	
Other (please specify):	
TOTAL (GST EXCL.)	

Do you have contingency arrangements in place to cover any cost overruns (including if co-funding is not able to be secured, or any of your funding partners fail to make their contribution)?

Yes No

If yes, please provide details of contingency arrangements:

Section 6 - Employment details

Full time

 $Full\ time\ equivalent*$

Number of **existing** employees (including owners, partners, directors, etc.)

After completion of project, number of proposed additional employees (if applicable)

*Calculating Full Time Equivalent

Full time work is 35 hours per week or more. If your business has casual or part time workers, calculate the number of hours worked by these employees and divide that total by 35 to determine full time equivalents. (For example, seven casual employees working 10 hours per week totalling 70 hours per week, equates to two full time employees).

Section 7 - Project delivery

Legislative regulatory issues and approvals

Please provide details of the current status of the project and any licenses or approvals required before the project can commence. If applicable, attach copies of approvals and/or project planning including feasibility studies, business and marketing plans and research documents.

	Section 7 - Project delivery (continued)
	Project risks
	Please outline the key risks that the project will face, likelihood and proposed mitigations Consider risks including construction, financing, planning and approvals, legal, property acquisitions, procurement etc. (max. 250 words):
	Governance and partnership arrangements
	Detail all governance and partnership arrangements throughout all phases of the project delivery (e.g. roles, responsibilities and accountability). Outline the way the project will be organised including key decision makers, partnership/collaboration members, governance bodies (e.g. steering committees, advisory groups), proposed personnel, key stakeholders (e.g. stakeholder groups, liaison/communications officers), government agencies (e.g. DAF, State Development) and contractors (max. 250 words): Please detail the land tenure arrangements of the project location (please attach copies of tenure and/or lease arrangements):
	Please detail the land tenure arrangements of the project location (please attach copies of tenure and/or lease arrangements):
	Section 8 - Statistics
_	Please indicate your average farm income (based upon income in an average financial year):
	Farms with receipts greater than \$1 million Farms with receipts between 200K and \$1 million Farms with receipts less than \$200K

Section 9 - Statement of assets and liabilities

Statement of position as at date:

Assets (show present fair market value)	\$ Liabilities (current amount owing)	\$
Cash at Bank	Overdraft (Limit:\$)	
Term Deposits		
	Term loans	
Farm Properties		
1. Land ha @ \$ /ha=\$ Buildings (
) \$	Other Loans (eg. Private Loans)	
2. Land ha @ \$ /ha=\$ Buildings (
)\$		
3. Land ha @ \$ /ha=\$ Buildings (
)\$		
Livestock (show type):		
Livestock (show type):	Stock Loans/Pastoral House	
Plant and machinery	Hire Purchase, Leasing & Chattel Mortgage (transfer total from table below)	
Vehicles		
Crops (harvested, stored and unsold)	Entitlements Owing to Employees	
	Taxation Debt	
Accounts Receivable	Accounts Payable	
Debentures/Shares/Investments	Margin Loans	
Other Real Estate (show details)	Real Estate Loans (show details)	
Superannuation (current estimated value)	Personal Loans	
Other Assets (detail)	Credit Cards	
	Other Liabilities (detail)	
Total Assets	Total Liabilities	

Hire purchase and lease repayment schedule

			Instalments Le						
Item	Lender	(a) Instalment amount	Frequency e.g. monthly/ yearly	(b) No. of payments remaining	Date of final payment	(c) Overdue payments (Arrears)	(d) Amount Due date	Total owing (a x b + c + d)	

Section 10 - Acknowledgements, consents and privacy statement

In the following sections, titled acknowledgements, consents and privacy statement QRIDA means Queensland Rural and Industry Development Authority.

Acknowledgements

I/We have read and understood the guidelines at grida.qld.gov.au for the Drought Preparedness Grant Scheme and have obtained clarification where needed.

- all of the information provided in the whole of this application is true and accurate and discloses my/our correct financial position; and
- to the extent this application or any information provided in relation to this application contains information of, or about, another person, I/we have the authorisation of that person to provide the information and for it to be used and disclosed in accordance with the above authorisations.

I/We are aware that it is an offence and that penalties may be applied under the Rural and Regional Adjustment Act 1994 (Qld) if any information provided in an application or any document provided in respect of an application is found to be false misleading or incomplete in a material manner.

I/We are aware that ORIDA is bound by the *Public Records Act 2002* and are unable to return any documents forwarded as part of this application

Do you have, or have you had, any business dealings with QRIDA that could be considered an actual, potential or perceived Yes Nο conflict of interest with this application?

If Yes - please provide details of all your business dealings with QRIDA that may be considered an actual, potential or perceived conflict of interest:

I/We have read the Privacy Statement below and understand how personal information provided in my/our application may be used.

Consents

I/We authorise QRIDA and each of its authorised representatives to obtain or collect such information as QRIDA or an authorised representative considers to be necessary or appropriate in connection with this application or any aspect of the Scheme from:

- any accountant, solicitor, business consultant, bank, financier, supplier, processor, or other agent named or identified in this application or in supporting documentation provided with, or in support of, this application; and
- any Commonwealth, state or local government department, agency or authority that QRIDA or an authorised representative may consider relevant, b)

Without limiting the above, I/we authorise any Relevant Person to disclose to QRIDA and its authorised representatives such information as may be requested about me/us in connection with this application or any aspect of the Scheme.

I/We understand and agree that QRIDA and its authorised representatives will use information contained in or provided in relation to this application and my /our financial statements and personal taxation returns and other supporting information to determine if my/our business is eligible to receive a grant under the Scheme and in relation to the administration and management of the Scheme and any grant provided to me/us under the Scheme.

- a) QRIDA and each of its authorised representatives to disclose:
- that I/we have made this application;
- information contained in this application or any supporting documentation provided with, or in support of, this application;
- information collected by QRIDA or an authorised representative from any Relevant Person; and information about any previous application I/we have made to, or financial assistance I/we have received from, QRIDA. (in each case, Disclosable Information) to any:
- Relevant Person or any contractor or agent of QRIDA, for purposes related to the assessment of this application or the administration and management of the Scheme or any grant provided to me/us under the Scheme, and for the purposes set out in the Privacy Statement; and
- any other, Queensland Government department or Commonwealth Government department, agency or authority, for policy planning;
- b) the use of Disclosable Information by any department, agency or authority or other person referred to in a) above for a purpose stated in a) above or any purpose set out in the Privacy Statement.

I/We agree to participate in follow up surveys regarding any grant provided under the Scheme or its outcomes, if requested.

I/We agree to QRIDA using your personal information to provide you with information (including, where permitted by law, by telephone (including by text or SMS or electronically) about this grant product.

Authority to disclose certain information to joint applicants -

I understand that if I fail to provide any information requested in this form or do not agree to any of the possible exchanges or uses detailed above my application may not be accepted by QRIDA.

Privacy statement

QRIDA may collect, use, and disclose the personal information provided via this form in accordance with the Information Privacy Act 2009 (QId) and its privacy policy, available at grida.qld.gov. au/privacy. Personal information provided on, or in support of, this application by you or that is obtained from any Relevant Person, may be used by QRIDA and its authorised representatives to assess your eligibility for the Scheme and your application for the Scheme, and in relation to the administration and management of the Scheme or any grant provided to you under the Scheme. QRIDA may also use this information to provide you with information, goods or services, facilitate its internal business operations and fulfil legal obligations, research and develop its service, to collate statistical data, and otherwise where required or permitted by law. In some cases, QRIDA may use or disclose your personal information to provide you with information on other QRIDA programs or other support programs that may be relevant and of interest to you. QRIDA may disclose your personal information in accordance with the authorisations above and any department, agency, authority or other person to which such information is disclosed may use the information for the purposes stated in the authorisations. QRIDA may also disclose your personal information to its employees, contractors, related affiliates and third parties who assist it in operating its business and providing information, goods and services to you, or as otherwise required or authorised by law. Further information on these third parties is set out in the privacy policy. Some third parties may be located overseas and you agree to QRIDA disclosing your personal information to overseas entities to enable it to perform its functions and activities. Other than as set out in the authorisations above, QRIDA is not aware of any further disclosures of your personal information made by any recipient. More information about the way QRIDA uses, discloses, and secures your personal information, how you can access and correct that information, and how you can make a complaint about a breach of privacy can be found in its privacy policy. QRIDA will comply with the Human Rights Act 2019 (Qld) when making any decision, including with respect to collection, use, and disclosure of personal information.

In signing below, I/we are acknowledging and/or consenting to each of the matters indicated above:

Applicant	Signature	Name	Position	Date
One				
Two				
Three				
Four				

Further information

Did you engage with a QRIDA Regional Area Manager for this application?

Yes

Who else assisted you with this application process?

Financial Counsellor Accountant Consultant QRIDA - Head Office

Other, please specify:

How did you find out about this assistance?

QRIDA Regional Area Manager QRIDA Head Office QRIDA Website Financial Counsellor

Newspaper advertisement Radio advertisement Social media Event (please specify below)

No

Prime Focus (QRIDA newsletter) Word of mouth Other, please specify:

How to apply

Please submit your completed application including all supporting documents to QRIDA by:

Post: GPO Box 211, Brisbane QLD 4001 Email: contact_us@qrida.qld.gov.au Fax: (07) 3032 0300

Enquiries

Further information on the program is available on the QRIDA website at ${\bf qrida.qld.gov.au}$

If you need assistance with completing your application, or wish to speak to a Regional Area Manager, please contact QRIDA on 1800 623 946.