

+ Drought Preparedness Grants Application Form

Existing client ID No
OR new client to QRIDA

v5 24/10/2022

Information checklist

The following information is required by QRIDA to assess your application <i>You can use your own templates or the templates available as detailed below</i>	Provided with this form:	
Farm Business Resilience Plan <i>A template is available at daf.qld.gov.au/drought-assist Note: if using your own format for the Farm Business Resilience Plan it must comply with the requirements for a Farm Business Resilience Plan as outlined in the definition of a resilience plan from the Guidelines available at qrda.qld.gov.au/program/drought-preparedness-grants</i>	Own format	Farm Business Resilience Plan template
Statement of Position <i>The statement of position must be as at the time of application</i>	Yes	
Copy of quotes to verify costs of each drought preparedness activity	Yes	Not applicable
Supporting information		
Planning approvals (please refer to Section 7)	Yes	Not applicable

Funding under Drought Relief Assistance Scheme (DRAS)

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 details

Applicant entity name

Applicant entity ABN
(if applicable)

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GST registered? Yes No

Please select the borrowing entity:

Sole trader

Partnership

Individual trustees

Company directors

Title	Surname	Given Names	Date of Birth

or

Company

Company name

Please list the Company Director/s' details above

or

Trust

Trustee

Individual (please provide the individual trustee/s details above)

Company (please provide the Company name and the Company Directors' details above)

Trust name

1800 623 946

qrda.qld.gov.au

[/QRIDAMedia](https://www.facebook.com/QRIDAMedia)

[/QRIDAMedia](https://www.facebook.com/QRIDAMedia)

[/company/QRIDA](https://www.linkedin.com/company/QRIDA)

[@we.are.qrida](https://www.instagram.com/we.are.qrida)

Queensland Rural and Industry Development Authority (QRIDA)

GPO Box 211 Brisbane Qld 4001 Email: contact_us@qrda.qld.gov.au ABN: 30 644 268 943



Section 1 - Applicant details (continued)

Trading name

Industry type

Applicant contact name

Landline

Fax

Mobile

Email address

IMPORTANT:

By ticking this box, you consent 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, including the progress of your grant application, and if your application is successful. Please refer to the privacy statement on page 6 of this document.

Road address of enterprise:**Postal address of enterprise:**

Please tick if same as road address

Town/city

State

Postcode

Town/city

State

Postcode

Accountant

Contact person

Telephone

Fax

Firm

Email

Bank or financier

Contact person

Telephone

Fax

Bank /
Financier name

Email

Branch

Section 2 - Drought preparedness

As part of the conditions to receive a Drought Preparedness Grant, a Farm Business Resilience Plan is required. The activities that you are applying for in this grant must also be stated in your Farm Business Resilience Plan.

Please detail drought preparedness strategies for your property.*(If applicable, please provide current water licenses (including water licence number and megalitres)***Section 3 - Project/activity summary****Project/ activity summary***Please provide a clear, brief overview on the type of project and intended outcomes (max. 150 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 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 is 25% up to \$50,000)	Grant contribution	\$20,000	Activity timeframe	Start date	01/03/2022
	Applicant contribution	\$60,000		End date	01/09/2022

Project Activity Milestone One						
Activity						
Address project will take place on	Road address				LGA	
	Lot		Plan		Area (ha)	
Description						
Total cost (Grant contribution is 25% up to \$50,000)	Grant contribution			Activity timeframe	Start date	
	Applicant contribution				End date	

Project Activity Milestone Two						
Activity						
Address project will take place on	Road address				LGA	
	Lot		Plan		Area (ha)	
Description						
Total cost (Grant contribution is 25% up to \$50,000)	Grant contribution			Activity timeframe	Start date	
	Applicant contribution				End date	

Project Activity Milestone Three						
Activity						
Address project will take place on	Road address				LGA	
	Lot		Plan		Area (ha)	
Description						
Total cost (Grant contribution is 25% up to \$50,000)	Grant contribution			Activity timeframe	Start date	
	Applicant contribution				End 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.

Description of all project costs	Cost (\$)	Funding source	Amount (\$)
		Grant Funding requested	
		Applicant's contribution	
		Partnership funding	
		Other (please specify):	
		TOTAL (GST EXCL.)	
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
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Yes No

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):*

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 – 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 qrda.qld.gov.au for the Drought Preparedness Grant Scheme and have obtained clarification where needed.

I/We certify that:

- 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 QRIDA 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 conflict of interest with this application?

Yes

No

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, (each a **Relevant Person**).

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 loan under the Scheme and in relation to the administration and management of the Scheme and any loan provided to me/us under the Scheme.

I/We authorise:

- 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 loan 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;
- 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 loan 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* (Qld) and its privacy policy, available at qrda.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 No

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)
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 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**.