Disaster Assistance Loans Essential Working Capital Application Form Non-Profit Organisations

V15 24/10/2025 Fund code: DALEWCNP25

Information checklist		
The following information must be provided to QRIDA:	Provided wi	th this form:
Proof of identification Please provide copies of identification for all borrowers. Acceptable documents can include any three of the following: • Birth Certificate - if your current name does not match your Birth Certificate, please also provide a Marriage Certificate or Change of Name Certificate. Birth Extracts are not acceptable. • Drivers Licence - please ensure both the front and back of the card is included. • Medicare card • Passport If QRIDA is unable to verify your identity using the provided documents, you may be requested to provide alternate forms of identification.	Yes	No - please state why:
Past 3 (three) Years' Financial Statements Including Profit and Loss Statement, Balance Sheet and depreciation schedules Cashbook figures are acceptable if financial statements have not been prepared Financials must be provided for the applicant entity and all associated entities	Yes	No - please state why:
Annual Report	Yes	Not applicable
Monthly Cash Flows for the Current Financial Year	Yes	
Monthly Cash Flows for the Next Financial Year	Yes	
Schedule of Account Details A copy of the form is to be completed by each of your lenders (including banks, credit unions, lease/finance companies etc.) and attached to this application. Please arrange for your lenders to return this form to you prior to submission of the completed application to QRIDA.	Yes	
Australian Tax Office (ATO) Integrated Client Account Statement Copy of the ATO Integrated Client Account Statement (previous 12 months) for the applicant / each member and all associated entities.	Yes	
Organisational Constitution or Rules of Association and Certificate of Incorporation	Yes	
Please provide any additional information or documentation that you feel may support your app	lication.	
Which eligible disaster caused damage to your primary production enterprise? (Refer Disaster As	sistance Sche	eme Guidelines)

Section 1 - Organisation details										
Full legal name of the organisation										
Is it incorporated?	Yes	No	Incorporation number:							
Under which act are y	Under which act are you incorporated?									
Borrower's ABN:										





Section 1 - Applicant details Identification provided Applicant One (this applicant will be the borrowing entity contact for ongoing correspondence with QRIDA) (refer to checklist on page 1). Surname Given names Date of birth Title Mobile Business landline ${\bf Email} \ ({\it QRIDA will issue loan documentation from DocuSign to this email address if the loan application is successful)}$ Residential address Town/city State Postcode **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 SMS or electronically) about this loan product, including the progress of your loan application, and if your application is successful, loan account statements and payment reminders). Please refer to the privacy statement on page 7 of this document. **Applicant Two** Identification provided (refer to checklist on page 1) Title Surname Given names Date of birth Mobile Email (QRIDA will issue loan documentation from DocuSign to this email address if the loan application is successful) Residential address Town/city State Postcode **Applicant Three** Identification provided (refer to checklist on page 1) Title Date of birth Surname Given names Mobile Email (QRIDA will issue loan documentation from DocuSign to this email address if the loan application is successful) Residential address Town/city State Postcode **Applicant Four** Identification provided (refer to checklist on page 1) Title Surname Given names Date of birth Mobile Email (QRIDA will issue loan documentation from DocuSign to this email address if the loan application is successful) Residential address Postcode Town/city State Please tick if same as road address Road address of organisation: **Current postal address of organisation:** Postal name: Postal address: Town/city Town/city State Postcode State Postcode Accountant Contact Telephone person Firm **Email** Bank or financier Contact Telephone person Bank / **Email** Financier name

Branch

Section 2 - Payment details	
Please provide the organisation's bank account detail Bank	s for payment of the assistance funds by Electronic Funds Transfer: nch BSB
Account name	Account Number:
Section 3 - Organisation description and background	
When did the organisation commence operations in th	ue defined disaster area (DD/MM/YYYY)?
Number of paid employees (excluding office bearers):	
Full time Part time	Number of voluntary Number of members
	35 hours per week or more. If your business has casual or part time workers, calculate the total by 35 to determine full time equivalents. (For example, 3 casual employees working 12 ull time employee.)
Briefly describe the history of the organisation, what i	t does and its objectives. Please attach separate page if more space is required.
Section 4 - Details of disaster	
·	ion's income? Please attach a separate page if more space is required.
Does the organisation hold an insurance policy for any No Yes - if yes, please provide the following of	
Insurance company	Claim amount
Details of claim	
Claim outcome	

Section 5 - Proposed disaster-related project and funding details

Please detail the additional essential working capital necessary to continue the normal operation of the *non-profit organisation* for up to one year. Note: this assistance is not intended to compensate for the loss of income or provide assistance relating to direct damage suffered as a result of the *eligible disaster*.

Funding requirement (refer example page 8)	Amount
Peak closing bank balance shown on your current or next financial year cash flow projection	
Less your contribution - cash or investments*	
Less overdraft limit*	
Indicated cashflow shortfall (please do not include proposed loan in your cashflow projection)	

* You must use all liquid assets and available normal credit limits to be eligible for assistance under this scheme.

Preferred terms and conditions							
Loan terms - Disaster Assistance (loan up to \$100,000)	years (maximum 10 years)		Interest onl	ly for:	One year	Two years	N/A
Repayment frequency	Monthly	Quarterly	Half yearly	Year	ly		

Section 6 - Property details

Please show all properties owned or leased by the organisation. *Please copy and attach additional pages if the organisation has more than one property.*

Property type (e.g. clubhouse)

Owned Purchase date Purchase price Current market value

Leased Lease payment (p.a.) Expiry Options

Registered owners

Title reference No or Lease No Lot Plan Area (ha)

Property address

Section 7 - Security

The Disaster Assistance Scheme requires all loan recipients to provide adequate security (preferably in the form of a property mortgage). Please outline your available security and mortgage arrangements should your application be successful.

Section 8 - Statement of assets and liabilities

Please list all of the assets and liabilities of the organisation.

Please tick if your statement of assets and liabilities is included in a separate template

Assets (show present fair market value)	\$ Liabilities (current amount owing)	\$
Cash at Bank	Overdraft (Limit:\$)	
Term Deposits		
	Term loans	
Real estate		
Address:		
	Other Loans (e.g. Private Loans)	
Stock (show type)	Stock Loans/Floor plans	
Stock (Show type)	Stock Edulis/11001 plans	
Plant and machinery	Hire Purchase, Leasing & Chattel Mortgage (transfer total from table below)	
Vehicles		
	Entitlements Owing to Employees	
	Taxation Debt	
Accounts Receivable	Accounts Payable	
Debentures/Shares/Investments	Margin Loans	
Other Assets (detail)	Other Liabilities (detail)	
Total Assets	Total Liabilities	

Hire purchase and lease repayment schedule

				Instalments	Lease r				
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)
Total owing (transfer total to 'Statement of Assets and Linbilities' above)									

Total owing (transfer total to 'Statement of Assets and Liabilities' above)

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;
- Identify Verification Service Provider and credit reporting body means Dun & Bradstreet (Australia) Pty Limited ACN 006 399 677 trading as Illion; and
- Electronic Signature service Provider means DocuSign, Inc.

Please tick each of the below to indicate your acceptance. Your acknowledgement and acceptance of each item is a condition of submitting a valid application. Acknowledgements

I/We have read and understood the guidelines at grida.gld.gov.au for the Disaster Assistance Loan Essential Working Capital – Non profit Organisations 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.

I/We certify that 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 have read the Collection Notice and the Privacy Statement below and understand how personal information provided in my/our application may be

I/We certify that the business which is subject of this application is not in administration, liquidation or a state of insolvency and that all of the business owners are similarly, to the best of my/our knowledge, not in a state of bankruptcy, insolvency, financial distress or difficulty.

I/We are aware that QRIDA is bound by the *Public Records Act 2023* and are unable to return any documents forwarded as part of this application.

I/We are aware that should our loan application be approved, the loan documents will be issued through DocuSign. I/We agree to execute the loan documents electronically via DocuSign (if you are unable to receive documents via DocuSign, please contact QRIDA at any time thoughout the 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?

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:

Consent to Third Party Disclosures

I/We authorise any Relevant Person to disclose to QRIDA and each of its authorised representatives 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 a Relevant Person ^, including my/our financial statements and personal taxation returns and other supporting information to verify my/our identity, 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.

^ For the purposes of the above consents, Relevant Person includes:

- the Identity Verification Service Provider and credit reporting body, the Electronic Signature Service Provider, any accountant, solicitor, business consultant, bank, financial, 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.

To enable QRIDA to assess your application for a loan, QRIDA may need to be provided credit reporting information and credit eligibility information about your business and yourself.

I appoint QRIDA as an access seeker under the Privacy Act 1988 (Cth) and authorise QRIDA to make applications on my behalf to request credit reporting information and credit eligibility information from the Credit Reporting Body and other credit providers. I authorise QRIDA to disclose personal information to the Credit Reporting Body and other credit providers in order to request credit reporting information and credit eligibility information and to obtain and use information contained in the Failure Risk Report and any other information provided to us by the Credit Reporting Body and other credit providers.

Notice that credit information may be given to a credit reporting body:

To assist the Australian credit reporting system to function effectively, QRIDA may disclose to a credit reporting body certain business and personal information about you which includes:

- your identification;
- that credit has been applied for and the amount;
- that QRIDA is a current credit provider to you (although is not a 'credit provider' for the purposes of the *Privacy Act 1988* (Cth)); details of payments which become overdue for more than 60 days;
- d)
- that payments are no longer overdue: e)
- details of payments made by you which have been dishonoured more than once;
- that you have committed fraud in applying for or receiving credit from QRIDA or in evading your obligations regarding the credit received, or have attempted to do so; g)
- that the credit provided to you by QRIDA has been paid or discharged.

Credit reporting bodies may include the above information in reports provided to other credit providers to assist them to assess your credit worthiness.

Information Collection Notice

Collection and use of your personal information

QRIDA and its authorised representatives are collecting and obtaining (from you and from the Relevant Persons) your personal information in connection with the Scheme, for the following purposes:

- verification of your identity and credit reporting information;
- assessment of your application and your eligibility for the Scheme at the time of making the application and on an ongoing basis; the administration and management of the Scheme or any loan provided to me/us under the Scheme including for compliance and enforcement purposes; and
- any other purposes related, or otherwise necessary to give effect, to the purposes listed above.

QRIDA and its authorised representatives may also use your personal information for the following purposes:

- to contact you in relation to your application, and the evaluation of the Disaster Assistance Loan Essential Working Capital;
- to facilitate its internal business operations and fulfil legal obligations; to assess the performance of QRIDA and other Queensland and Commonwealth Government grant and loan programs and services;
- to promote or market QRIDA and other Queensland and Commonwealth Government grant and loan programs and services (including the success and outcomes of the programs and services);
- research and development of QRIDA and other Queensland and Commonwealth Government actual and proposed services;
- to identify and assess your eligibility for or interest in other QRIDA and Queensland and Commonwealth Government administered grant and loan programs or services;
- to collate statistical data; and
- as permitted by law, including in accordance with QRIDA's disclosure rights under s. 40 of the Rural and Regional Adjustment Act 1994.

Continued over page...

Section 9 - Acknowledgements, consents and privacy statement (continued)

Disclosure of your personal information

QRIDA may disclose your personal information to the Relevant Persons, QRIDA's employees, contractors, related affiliates and third parties to the extent necessary or convenient to enable QRIDA to further the purposes described above (which do not extend to commercial purposes). Government agencies to whom personal information is to be disclosed are:

- Department of Primary Industries
- Queensland Reconstruction Authority
- Queensland Treasury

Consent

By completing and submitting this application, you are consenting to QRIDA using the email address listed in this application, should your loan be approved, for the provision of any or all necessary loan documentation and managing your personal information in the manner described in this Collection Notice and our Privacy Policy.

Privacy statement

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.

By ticking this box, I/we are acknowledging and/or consenting to each of the matters I/we have indicated above.

Further information on the program is available on qrida.qld.gov.au

Signed for and on behalf of the organisation by:

Please ensure an authorised member of the Executive/Management Committee completes the section below.

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.**

Application and cashflow guidance

General guidance

QRIDA has Regional Area Managers based in Brisbane, Bundaberg, Emerald, Hughenden, Innisfail, Kingaroy, Mackay, Rockhampton, Roma, Toowoomba and Townsville who can assist you with any questions. To speak to your local Regional Area Manager, please contact QRIDA on **1800 623 946**.

Please complete each section in the application form and forward it to QRIDA with the required attachments (listed on page 1). Incomplete applications or missing attachments are likely to cause delays in assessing your application and may result in the application being declined.

Cashflow guidance

The cashflow forms should be completed by those who understand the business best. This is usually the owners and operators of the business. Your Accountant or Financial Advisor may be able to assist, if needed.

A projected cashflow, in which you estimate as accurately as you can the income and expenses for a current/future period, is probably the most important tool your business can have. You should base your projections on your historical results (past financials) and your knowledge of what might be different this year and the following year. The ability to check your actual results with what you expected will assist you to make critical decisions about your business.

QRIDA requires a monthly cashflow for the current year, plus the next full financial year. Microsoft Excel versions of the cashflow form are available to download from the QRIDA website (qrida.qld.gov.au). If you use the Excel cashflow, the totals will automatically calculate and you may find it is easier to complete. If you have your own computer prepared cashflows, please feel free to send them instead.

Completing a cashflow

The steps below outline how to complete a QRIDA application cashflow:

- 1. Fill in your name and QRIDA Client Identification Number (if known) at the top of the form and complete the relevant year.
- 2. Income
 - Refer to your past financials for suitable headings or use those shown as a guide. Please note that livestock/stock sales are shown (not the profit), with purchases shown in the purchases section of the form. These monthly figures should agree with the total sales shown in Section 9 (page 4) of your application form.
 - All income should be shown, including personal wages, interest and dividends from investments, rents from properties, any other personal income, government assistance and all business income. Use your historical records to estimate when income will be received, but adjust for your knowledge of any changes to sales patterns or income receipts. Do not include the QRIDA loan amount you are applying for.

3. Expenses

Again you should refer to your past financials for suitable headings for your business. Please use the headings shown as a
basic guide. These will also assist you with the timing of payments. Do not include non-cash items such as Depreciation or
Bad Debts in your cashflow.

4. Purchases

Here you should include all your livestock/stock purchases in the months when you expect to pay for them. These figures should agree with the total purchases shown in Section 9 (page 4) of your application form. Capital purchases would include major items such as vehicles or equipment (the cash amount paid excluding lease/HP etc), major renovations or improvements, new fences, irrigation equipment etc. Please make a note of the type of capital purchase. Include in this section the costs to restore your business from Section 5 (page 2-3).

5. Other expenses

- Here you would list all of your:
 - lease, hire purchase or chattel mortgage payments interest on overdraft or similar type of non reducing facility, and
 - total repayments on term loans, personal loans, private loans, housing loans and credit cards.

You also need to record your personal drawings, medical contributions and payments, education expenses for yourselves or dependants and life insurance payments.

6. Surplus or (Deficit)

• This total will be automatically calculated if you are using the Microsoft Excel version of this form from the QRIDA website. If you are completing the form manually, please calculate the difference between Income and Expenses. If income is greater, you have made a surplus or profit. If Expenses are greater, you have made a (deficit) or loss.

7. Opening and closing bank balances

• If completing the cash flow for the current year, the opening bank balance of your overdraft or operating account for July should be taken from your bank statement and adjusted if necessary for outstanding cheques. If completing the cash flow for the following or subsequent years, the opening bank balance will be the closing bank balance from the previous year's cash flow which you have completed.

The purpose of this calculation is to provide an estimate of your bank balance (the closing balance) at the end of each month, and indicate your peak debt or credit. The closing balance is calculated by adding the opening balance to the monthly surplus or (deficit), which then becomes the opening balance for the next month.

Example cashflow projection and requirements and funding tables

Client Name: AB Cricket C	lub Inc				Client ID): 65432							
MONTHLY CASHFLOW FOR	MONTHLY CASHFLOW FOR CURRENT FINANCIAL YEAR: JULY 2020 - JUNE 2021												
Income	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Total
Sales	25,000	25,000	30,000	35,000	40,000	35,000	30,000	40,000	40,000	55,000	45,000	40,000	440,000
Membership fees	10,000	10,000	10,000	10,000	10,000	15,000	5,000	50,000	20,000	45,000	30,000	10,000	225,000
Other													
Total Income	35,000	35,000	40,000	45,000	50,000	50,000	35,000	90,000	60,000	100,000	75,000	50,000	665,000
Expenditure - fixed and va	ariable (an	nend, add	or delete	headings	s as neces	sary to s	uit your b	usiness - ı	refer to pa	st financi	als)		
Fixed costs	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	8,000	96,000
(Detail)													
Variable costs	22,750	22,750	26,000	29,250	32,500	32,250	22,750	58,500	39,000	65,000	48,750	32,500	432,250
(Detail)													
Sub total	30,750	30,750	34,000	37,250	40,500	40,500	30,750	66,500	47,000	73,000	56,750	40,500	528,250
Purchases	31,731	3 773	31,	3,7 3	1-73	17,3	3 773	7,3	177	13.	3 7,3	1173	3 -7 3
Ground repairs							30,000	30,000					60,000
Drainage repairs							68,000	50,000					68,000
Building repairs							00,000	30,000					30,000
Equipment replacement								27,000					27,000
Sub total							98,000	87,000					185,000
Other expenses							90,000	07,000					105,000
Lease/HP/Chattel Mortgage	F60	F60	F60	F60	F60	F60	F60	F60	F60	F60	F60	F60	6 720
Interest	560 300	560 310	560 320	560 310	560 300	560 290	560 290	560 290	560 290	560 290	560 290	560 290	6,720
				_		-	-	-		-	-	-	3,570
Loan repayments Affiliation fees	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	2,000	48,000 24,000
	-												
Players' insurance	500	500	500	500	500	500	500	500	500	500	500	500	6,000
Sub total Total Expenditure:	7,360	7,370	7,380	7,370	7,360	7,350	7,350	7,350	7,350	7,350	7,350	7,350	88,290
-	38,110	38,120	41,380	44,620	47,860	47,850	136,100	160,850	54,350	80,350	64,100	47,850	801,540
Surplus (Deficit)	-3,110	-3,120	-1,380	380	2,140	2,150	-101,100	-70,850	5,650	19,650	10,900	2,150	-136,540
Opening bank balance	-53,110	-56,220	-59,340	-60,720	-60,340	-58,200	-56,050	-157,150	-228,000	-222,350	-202,700	-191,800	
Closing bank balance	-56,220	-59,340	-60,720	-60,340	-58,200	-56,050	-157,150	-228,000	-222,350	-202,700	-191,800	-189,650	
	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	

How QRIDA will determine your borrowing needs:

The level of assistance for which you may be eligible will be determined by:

- 1. Establishing from your cashflow budgets accompanying this application the anticipated Peak Closing Debit Balance of your working account over the next 12 months.
- 2. Deducting from that figure any available cash contribution and/or drawdown of undrawn lines of credit, (excluding your overdraft limit) to be applied toward your post disaster working capital needs.
- 3. Then deducting your full overdraft limit (if any).

Funding requirement	Amount
Peak closing bank balance over next 12 months as shown on cashflow projection	\$228,000
Less your contribution - cash or investments	nil
	<u></u>

Less overdraft limit \$150,000
Indicated Cashflow Shortfall \$78,000

Example two

Example one

 •
Amount
\$228,000
\$10,000
\$150,000
\$68,000

+Schedule of Account Details

A separate copy of this form is to be completed by *each* of your lenders. Please arrange for your lenders to return this form to you before submitting your completed application form to QRIDA. (Includes banks, finance companies, building societies, credit unions and private lenders. For applicants and *all* related entities)

Consent and Authorisation								K	teturn inst	ructions	
To:	(Bank/Financier name)								Please return this form to me/us by:		
Please list below details of								ne	Fax:		
right of this form). You are accounts.	also authorised to discuss	s my/our accounts v	with QRIDA	and provide any inform	ation QRID	A may request	regarding my/our		Email:	:	
Name/Company/Firm:				Applicant's Signature:					Post:		
Name/Company/Firm:				Applicant's Signature:							
		Loan A	Accounts, E	quipment Finance and C	ther Borrov	vings (Debit Ac	counts)				
Account name	Account BSB & Number	Facility Type	Balance	Limit	Interest Rate	Expiry Date	Repayment Amount	Repaym Frequen		Balloon or Residual	Arrears
Contingent Liabilities:			T								
		Savings Accounts,	, Term Depo	sits, Investment Accour	nts and othe	er Asset Accour	its (Credit Accounts)			
Account name		Account BSB & Nu	ımber		Account	Туре			Balance		
I/we confirm the above info	ormation is true and correc	t at the date execut	ed.								
Branch address/stamp:											
Manager name:	M	Manager signature:				Da	te:				
Email address:			Р	none number:				Fax	k Number:		
		An a	dditional Scl	nedule of Account Details fo	orm is availab	le on QRIDA's we	bsite				



(7) (10) (10)