Before you start

The Better Local Business Grant Program

The <u>Better Local Business Grant program</u> is administered by the **Department of Customer Services, Open Data, and Small and Family Business (CDSB)**. This program is designed to support chambers of commerce, small and family business associations, industry associations and local councils to bring local business owners and stakeholders together to address key business concerns, issues or opportunities in their region.

The Department will only accept grant submissions online via SmartyGrants. All required information and documentation must be submitted through the designated form. Additional materials or information cannot be accepted after submission.

Before applying, please review:

Grant Guidelines# Terms of Use# Frequently Asked Questions

Icon Key

- Acceptable # Evidence Required # Hint
- # Notice # Please note # Warning

Definitions

- **Applicant** means the Chamber of Commerce, small and/or family business association, industry association or Local Council submitting this grant.
- Application means this form.
- **Authorised Contact** means the person responsible for submitting this grant, and if approved, undertaking the grant funded activity per the terms of the funding agreement.
- **the Department** means the Department which is responsible for administering this grant on behalf of Queensland Government, this is the Department of Customer Service, Open Data, Small and Family Business.
- Third Parties mean agents or other parties not directly related to the **Applicant** organisation. This could encompass a business or financial advisor, such as an accountant, or supplier for the activity.
- # Tips for completing this form
 - Read each question and the accompanying information carefully before answering.
 - Click 'Save Progress' regularly as SmartyGrants does not save progress automatically.
 - Provide only realistic and probable answers.
 - Finalise all responses before submitting, as no additional information or evidence can be provided afterward.

• Once complete, click 'Submit' to send the form to the the Department for processing.

If you're unsure how to answer a question, email your concerns or queries to <u>grants@desbt.qld.gov.au</u>. # Please include your application number with any correspondence (e.g. **BLB2025-XXX**).

Handling Validation Errors

As you complete the form, red-highlighted validation errors may appear. These typically occur when:

- A mandatory field, including file uploads, is left blank.
- Letters are entered into a numeric field.
- The word limit for a question is exceeded.

If errors appear, ignore them until you've completed your data entry and clicked 'Save.'

To resolve errors:

- Carefully read the error message or hint provided.
- Update the relevant question or section to fix the issue.
- **# Note:** All validation errors must be resolved before you can submit the form.

Eligibility

* indicates a required field

Eligibility Warning

The Department will only consider:

applications submitted by a Authorised
 Contact directly linked to the applicant
 organisation. Applications from third parties
 will not be accepted.

an eligible **Authorised Contact** includes owners, business partners, directors, employees (manager level or higher), trustees, public officers, office bearers, or company secretaries of the organisation applying for the grant.

ineligible **Third Parties** can include businesses or financial advisors, such as accountants, or suppliers involved in the grant-funded activity.

Confirmation of Eligibility

This section of the registration form is designed to help both the **Applicant** and **the Department** determine eligibility for this grant.

Please review the # <u>Grant Guidelines</u> and # <u>Terms of Use</u> which detail the eligibility criteria and requirements for participation in this Program.

If you have any questions regarding the eligibility criteria, please contact the DESBT **Small Business Hotline on 1300 654 687** or email <u>grants@desbt.qld.gov.au</u>.

Please complete this section before proceeding further.

I confirm the Applicant has read and understood the Guidelines and Terms of Use

⊖ Yes

⊖ No

I confirm the Applicant at the time of submitting this form: *

□ has an active Australian Business Number (ABN)

 \Box is based in Queensland

 $\hfill\square$ is a small and/or family business association or group, Chamber of Commerce, Industry Association or Local Regional Council

 $\hfill\square$ is not insolvent and any directors of the organisation are not an undischarged bankrupt or currently bankrupt

Where required, the Applicant holds public liability insurance of at least \$10 million. $\ensuremath{^*}$

O Yes O No # Public liability may be required on the type of event and/or venue

I confirm that I am authorised or delegated to submit this application on behalf of the Applicant organisation and that I am not a third party. *

 \bigcirc Yes

O No

Venue details

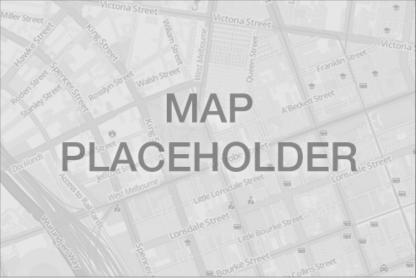
The venue details will be used to help determine your eligibility for the grant.

Venue name (if known)

This is where your event or activity will be held

Where will your proposed event be held? *

Address



Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia If you do not know the exact address, provide the suburb/town where the event will be held

Can't find the address?

Make sure you don't put in spaces on either side of a unit right-slash "/" or a dash "-".
 If your address isn't in the lookup, first, search for the street only, select that and click back in the lookup box and select "*Can't find your address?*".
 You can then enter the rest of your address in the address fields.

Local Government Area

Applicant Information

* indicates a required field

Privacy Statement

The Department collects your personal information for the purposes of:

- managing the Better Local Business Grant;
- promoting relevant issues and services to you; and
- researching and reporting on grant programs.

The Department, including its employees, may use and disclose the personal information provided in the application to third parties for these purposes. Third parties include:

- Queensland government departments and agencies;
- Commonwealth government departments and agencies;
- other state or territory government departments and agencies; and
- non-government organisations.

The Department or the Minister may publish grant recipient information on government websites or in media releases while publicising the outcomes of the program. Published

information may include the organisation name, funding amount, suburb/postcode, and outcome details.

The Department will only use your personal information for these purposes. The Department will handle your personal information in accordance with the <u>Information Privacy Act 2009</u>. The Department_will not otherwise use or disclose the information unless authorised or required by law.

You may view the Queensland Government's privacy guide at <u>www.qld.gov.au/legal/privacy</u>.

I confirm the Applicant has read, understood and accepts the Privacy Statement.

⊖ Yes

○ No

Organisation Details

The organisation is the entity that will receive the grant funding, if approved, and will be responsible for hosting the event or activity outlined in this application.

Organisation ABN: *

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Information from the Australian Business Register				
ABN				
Entity name				
ABN status				
Entity type				
Goods & Services Tax (GST)				
DGR Endorsed				
ATO Charity Type More	<u>information</u>			
ACNC Registration				
Tax Concessions				
Main business location				

Must be an ABN.

Please check through your organisation ABR record that appears in the grey box:

- Is the ABN Status active?
- Is the Main business location in **Qld**?

#If any of the information in your ABR Record is incorrect:

1.Apply to update your ABR record. It only takes 24-hours to update.

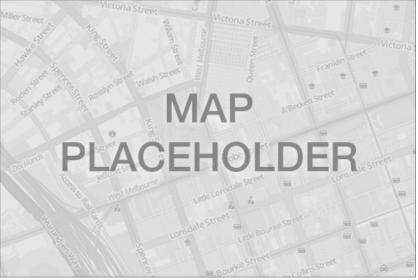
- <u>https://www.abr.gov.au/business-super-funds-charities/updating-or-cancelling-your-abn/update-your-abn-details</u>.
- 2.Wait 24-hours, re-enter your application and click '**save**' on the page. This should refresh the form with the updates from your ABR record.

Organisation Name * Organisation Name	# Please enter your <i>entity name</i> (associated with your ABN above) using capitalisation for the first letter of each word.		
	 Avoid using all uppercase or all lowercase letters. e.g. The Big Fish Company. 		
	# If you enter a different business name to the registered entity name above, your application may be deemed ineligible if a clear association between the name and the ABN cannot be validated.		
Type of Organisation *	# If your organisation type is not listed as an option, your organisation is not eligible for funding.		
	Consider partnering with an eligible local organisation that may be interested in collaborating with you to host the event or proposed activity.		
Primary Phone Number *	Primary Email *		
Must be an Australian phone number. Secondary Phone Number	# Please note: the outcome of your application will be sent to this email address. Must be an email address.		
Must be an Australian phone number.	Website *		
	Must be a URL. # Social media and public listing URLs for your organisation are accepted in lieu of a formal website.		

Please enter the Queensland Street address location where you operate your business.

Organisation Address * Address





Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

Can't find your address?

Make sure you don't put in spaces on either side of a unit right-slash "/" or a dash "-".
 If your address isn't in the lookup, first, search for the street only, select that and click back in the lookup box and select "*Can't find your address?*".
 You can then enter the rest of your address in the address fields.

Postal Address *

Address

F	Audress				

Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia

Authorised Contact Details

The authorised contact is who we talk to regarding your Better Local Business Grant application. They must be either:

- ✓ an owner✓ a trustee
- ✓ a business partner
- ✓ a director ✓ an office bearer of an association
- ✓ an employee ✓ a company secretary

Name *				Primary Phone Number *	
Title	First Name	Last Nam	e		
				Must be an Australian ph	one number.
Position title *	k			Secondary Phone Number	
				-	
				Must be an Australian ph	one number.
Role in organi	sation applying for fund	ding *			



Primary Email * Must be an email address.

Grant-funded Event or Activity

* indicates a required field

Purpose

What is the key business concern, issue or opportunity your event or activity intends to address? *

Word count:

Must be between 10 and 100 words.

Outline a specific challenge, gap, or opportunity in your local small and family business community that your event or activity aims to address. Explain why this issue is important and how your event or activity will seek to address it.

Details

The below information will be used by search engines (e.g. Google), in search results and event listings on the Business Queensland website.

Event or Activity name *	Estimated number of attendees *
# To be used in event/activity advertising.	# How many people are you expecting to participate in your event or activity?
	participate in your event of activity.
Stakeholder audience *	
	Event/Activity Summary (for promotional material) *
# Describe the industry, age, gender and location/ region of those participating in the event or	
activity.	Must be no more than 160 characters. # Please provide a couple of short sentences about your event or activity.

Full description of your proposed event or activity (this will appear under the summary on your event listing): *

Must be no more than 800 characters. # Add further details to the key points of your event.

Dates and times

Event Date(s) Date of your event *

The event must occur between 1 May and 31 May, 2025 to be eligible for this grant.

End date of the event *

The event must occur between 1 May and 31 May, 2025 to be eligible for this grant.

Expected Outcomes

Event Time

e.g. 7.30am or 4.30pm

End time of your event *

e.g. 7.30am or 4.30pm

How will your event or activity positively impact the small business community? *

Word count:

Must be between 10 and 200 words.

Describe how your event will directly benefit small businesses. Focus on the tangible outcomes such as fostering networking, creating new business opportunities, enhancing skills, providing access to resources, or addressing specific challenges faced by small businesses in the community.

How will your event connect regional small business communities? *

Word count:

Must be between 10 and 200 words.

Explain how your event will bring together small businesses from different areas or sectors. Highlight plans for collaboration, cross-promotion, and strengthening relationships between businesses. Consider how your event will create opportunities for businesses to share ideas, form partnerships, or expand their networks across regional areas.

Anticipated Costs

How will the grant money be spent?

In the budget grid below, outline the costs directly related to the grant funding you are applying for. Please note, a single grant of \$2,500 (exclusive of GST) is available per eligible organisation. Any expenses over the \$2,500 amount will need to be funded by your organisation.

Grant Funding cannot be expended on:

- marketing costs for existing organisation
- equipment for organisation
- payment of rates/bills for organisation
- alcohol charges as part of event or activity catering.

To adjust the grid, click the plus (+) button to add rows or the minus (-) button to remove them. You can also add more rows by clicking the "Add More" button.

Item	Total estimated cost (ex GST)	
	Must be a dollar amount.	
	\$	

Totals

Estimated Project Cost	Grant Funding Available	Estimated Overspend/Underspend
\$ # This amount is calculated based on your estimated costs.	# This is the total funding available per grant.	# Overspend : You will be required to pay for any related expenses more than the \$2,50 grant funding.

Application Ineligible

One or more responses in this form indicate your application is ineligible for funding. This could be:

- You have not confirmed you have read and understood the Guidelines and Terms of Use.
- You have not confirmed the Applicant meets the eligibility criteria.
- You have not confirmed the Applicants holds public liability insurance.
- You have not confirmed you are an authorised delegate to submit this application on behalf of the Applicant.
- You have not confirmed the Applicant has read and understood the privacy statement.

If you believe this is an *error*, please review your application to ensure your answers are accurate.

For further information, refer to:

Grant Guidelines# Terms of Use# Frequently Asked Questions

If you need assistance or have questions, email <u>grants@desbt.qld.gov.au</u> and include your application number (e.g., BLB2025-XXX) in your correspondence.

Certification and submission

* indicates a required field

Applicant declaration

I certify that: *

□ 1. I am authorised/delegated to make this declaration on behalf of my organisation; and

 $\Box~$ 2. I have read and understand the eligibility requirements for the Program as specified in the Guidelines and Terms of Use; and

 \square 3. The statements made within this application are true and correct; and

 $\hfill\square$ 4. I have not provided false or misleading information or documentation within this application; and

5. All matters that would affect the funding allocation decision have been disclosed; and

□ 6. Sufficient control mechanisms are in place to ensure that all monies can be managed and accounted for appropriately; and

□ 7. I understand that submitting this application does not guarantee that the organisation will receive a grant.

At least 6 choices must be selected.

Name of person certifying submission: *	Date of Certification: *	
	Must be a date and no earlier than 3/2/2	2025.

Submitting the application

- Pressing the **submit** button will lodge your application.
- Please review your application carefully before submitting, as you cannot make changes once it's submitted.
- You will receive an email receipt confirming your submission (please check your junk or spam folders). The Department will not have received your application until you receive this email.
- If you do not receive a receipt within **two business days**, please contact the Department.

For any further enquiries regarding this application, please contact the Small Business Hotline at 1300 654 687 or email <u>grants@desbt.qld.gov.au</u>.

Application Outcomes

Note: You will be notified via email of the outcome of your application in mid April 2025.