### 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 <a href="mailto:grants@desbt.qld.gov.au">grants@desbt.qld.gov.au</a>. # 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.

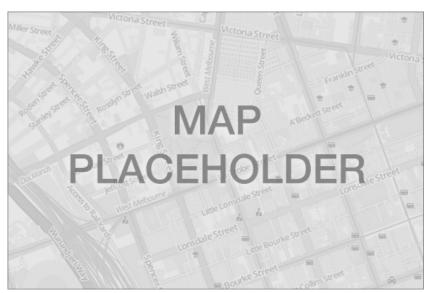
### Confirmation of Eligibility

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 <a href="mailto:grants@desbt.qld.gov.au">grants@desbt.qld.gov.au</a>.

# Please complete this section before proceeding further. I confirm the Applicant has read and understood the Guidelines and Terms of Use Yes  $\bigcirc$  No I confirm the Applicant at the time of submitting this form: \* ☐ has an active Australian Business Number (ABN) ☐ is based in Queensland is a small and/or family business association or group, Chamber of Commerce, Industry Association or Local Regional Council ☐ 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. \* ○ Yes  $\bigcirc$  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. \* Yes  $\bigcirc$  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?

- 1.Make sure you don't put in spaces on either side of a unit right-slash "/" or a dash "-".
- 2.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?".
- 3. 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 <a href="www.qld.gov.au/legal/privacy">www.qld.gov.au/legal/privacy</a>.

I confirm the Applicant has read, unders *	stood 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 information
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**?

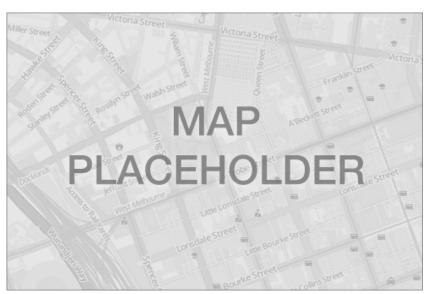
#If any of the information in your ABR Record is incorrect:

- 1.Apply to update your ABR record. It only takes 24-hours to update.
  - <a href="https://www.abr.gov.au/business-super-funds-charities/updating-or-cancelling-your-abn/update-your-abn-details">https://www.abr.gov.au/business-super-funds-charities/updating-or-cancelling-your-abn/update-your-abn-details</a>.
- 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.

# Better Local Business 2025 - Grant Application Form Form Preview

Organisation Name * Organisation Name	# Please enter your entity name (associated with your ABN above) using capitalisation for the first letter of each word.
	<ul> <li>Avoid using all uppercase or all lowercase letters. e.g. The Big Fish Company.</li> </ul>
	# 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 addre	ss location where you operate your business.
Organisation Address *	
Address	

# Better Local Business 2025 - Grant Application Form Form Preview



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

### # Can't find your address?

- 1.Make sure you don't put in spaces on either side of a unit right-slash "/" or a dash "-".
- 2.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?".
- 3. You can then enter the rest of your address in the address fields.

Postal Address *	
Address	

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 public officer
  - ✓ a director ✓ an office bearer of an association
  - ✓ an employee ✓ a company secretary

Name *			Primary Phone Number *
Title	First Name	Last Name	
			Must be an Australian phone number.
Position title	<b>:</b> *		Secondary Phone Number
			Secondary Phone Number
Role in orga	nisation applying for	fundina *	Must be an Australian phone number.

# Better Local Business 2025 - Grant Application Form Form Preview

	Primary Email *
	Must be an email address.
	Must be all elliali address.
Grant-funded Event or Activity	
* indicates a required field	
Purpose	
What is the key business concern, issue intends to address? *	or opportunity your event or activity
Word count: Must be between 10 and 100 words.	
# Outline a specific challenge, gap, or opportunity	in your local small and family business community why this issue is important and how your event or
activity will seek to address it.	why this issue is important and now your event of
Details	
Details	
# The below information will be used by search event listings on the Business Queensland we	ch engines (e.g. Google), in search results and bsite.
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?
	# How many people are you expecting to
# To be used in event/activity advertising.  Stakeholder audience *  # Describe the industry, age, gender and location/	# How many people are you expecting to participate in your event or activity?  Event/Activity Summary (for promotional material) *
# To be used in event/activity advertising.  Stakeholder audience *	# How many people are you expecting to participate in your event or activity?  Event/Activity Summary (for promotional material) *
# To be used in event/activity advertising.  Stakeholder audience *  # Describe the industry, age, gender and location/region of those participating in the event or	# How many people are you expecting to participate in your event or activity?  Event/Activity Summary (for promotional material) *  Must be no more than 160 characters.  # Please provide a couple of short sentences about
# To be used in event/activity advertising.  Stakeholder audience *  # Describe the industry, age, gender and location/region of those participating in the event or	# How many people are you expecting to participate in your event or activity?  Event/Activity Summary (for promotional material) *  Must be no more than 160 characters.
# To be used in event/activity advertising.  Stakeholder audience *  # Describe the industry, age, gender and location/region of those participating in the event or activity.	# How many people are you expecting to participate in your event or activity?  Event/Activity Summary (for promotional material) *  Must be no more than 160 characters.  # Please provide a couple of short sentences about your event or activity.
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Dates and times

# Event Date(s)  Date of your event *	# Event Time Start time of the event *
# The event must occur between 1 May and 31 May, 2025 to be eligible for this grant.	# e.g. 7.30am or 4.30pm
	End time of your event *
End date of the event *	
	# e.g. 7.30am or 4.30pm
# The event must occur between 1 May and 31 May, 2025 to be eligible for this grant.	

### **Expected Outcomes**

### 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**

# # This amount is calculated based on your estimated costs. # Took a provided to pay for any related expenses more than the \$2,500 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 <a href="mailto:grants@desbt.qld.gov.au">grants@desbt.qld.gov.au</a> and include your application number (e.g., BLB2025-XXX) in your correspondence.

### Certification and submission

\* indicates a required field

### Applicant declaration

### I certify that: \*

- $\square$  1. I am authorised/delegated to make this declaration on behalf of my organisation; and  $\square$  2. I have read and understand the eligibility requirements for the Program as specified in the Guidelines and Terms of Use; and
- □ 3. The statements made within this application are true and correct; and

□ 4. I have not provided false or mis	leading information or documentation within this
application; and	
	e funding allocation decision have been disclosed; and are in place to ensure that all monies can be managed
and accounted for appropriately; and	
☐ 7. I understand that submitting thi	is 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 3/2/2025.

### 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 grants@desbt.gld.gov.au.

### **Application Outcomes**

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