



Cherry Tree Wind Farm

Community Benefit Fund Application Form

Organisation and Contact

Name of organisation making the application:	
Contact person and position within organisation:	
Postal address:	
Phone and/or mobile:	
E-mail:	
Project name:	
Date Submission:	

Project Details

Provide a description of the project, including details including:

- how the project will meet community needs;
- details of any additional funding or prior funding and from who the project has received;
- how the requested funding will be used;
- whether the project delivers social, cultural, economic or environmental benefits to local communities;
- whether the project addresses an identified community priority;
- how the project will strengthen Cherry Tree Wind Farm's presence in the community;
- if the project is run by groups/organisations with suitable governance structures in place; assurance the project does not have a detrimental or negative impact on other community facilities and services;
- demonstration that any ongoing or recurrent costs of the project can be met by the community group once grant funding has been expensed;
- whether the applicant has capacity to manage funds and deliver the project; and
- how Cherry Tree Wind Farm will be acknowledged for its funding.

Please attach additional information to the application if desired.

1. ***Please ensure all applications and projects meet with the requirements and comply with the CBF Guidelines.***
2. ***Please list all additional supporting information provided (if none state "none"):***



Media

If using, please list web addresses of online social media channels used in conjunction with the project (eg Facebook page).

Please describe media campaigns planned to promote the project/event (eg Facebook page campaign).

Funding

Amount requested from Cherry Tree Wind Farm (inc GST if registered):	\$	
Amount of fundraising target (if applicable):	\$	Other:
Total value of project:	\$	
Date funding is required:		

ATO Registration Details

Is your organisation registered with an ABN?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please supply ABS number: ABN:
Are you registered for GST?	No <input type="checkbox"/> Yes <input type="checkbox"/>
Are you a registered tax-deductible gift recipient?	No <input type="checkbox"/> Yes <input type="checkbox"/> If yes, please advise TDGR status



Vendor Details

Account Name:	
BSB:	
Bank Account Number:	

I hereby give Cherry Tree Wind Farm permission to publish my organisation's name as a recipient of Cherry Tree Wind Farm sponsorship.

Signature:
Name (please print or type):
Date:



Atmos

RENEWABLES

October 2024 All Rights Reserve