

FINANCIAL ASSISTANCE Application Form

SECTION 1: APPLICANT'S DETAILS – all applicants complete this section

The name of Your Project	Main Circulation Pump Replacement
Name of the Organisation or person seeking financial assistance.	Portland and District Olympic Pool
Address	
Postal Address	P.O Box 123 Portland .NSW. 2847
Name and position of the contact person	Graeme Glazebrook - Treasurer
Telephone and Email Address	Telephone: 0263 555593 (bh)
	Fax:
	Mobile: 0438 501 611
	Email: Graeme.glazebrook@bigpond.om
What legal status does your organisation have? (e.g. Incorporated Association etc)	Incorporated Not for Profit Association
Australian Business Number (ABN) *	17613012583
Australian Company Number (if applicable)	
General Description of your Organisation	Community Organisation that provides a Public Recreational Facility.
Is your insurance, including a minimum of \$20m for public liability insurance, current? Please state policy numbers. (Council may request a copy of certificates of currency.)	Please list policies, insurer and policy number. Public Liability – Harrison Read .Policy Number – 40751703 . \$20 m. Workers Compensation Insurance – Icare workers insurance – Policy 107307201
What is the time frame of your project?	Start Date: 30 th March 2019 End Date: 30 th April 2019

- If you don't have an ABN, please attach a copy of the Australian Taxation Office form "Statement by a supplier". Applicants with an ABN DO NOT need to complete the Statement by a Supplier form.

AMOUNT OF FINANCIAL ASSISTANCE REQUESTED:

\$15,990

SECTION 2: APPLICATION / PROJECT DETAILS -- all applicants to complete.

Briefly describe your request/project. If required, attach additional details.

Replacement of Pool main water Circulation Pump.

Replacement of Pipework and Strainers.

Is your project new? Select one

YES

NO

N/A

If you answered no, please provide some information that illustrates the new part of an existing project that you are seeking funding for.

What are the aims of the request/project?

Improve the reliability of a critical part of pool infrastructure.

Comply with O.H.& S requirements.

Reduce energy consumption by installing a modern more efficient pump.

How will your request/project assist members of the Community?

It will ensure that the community owned asset can continue to provide an

important recreational facility for residents of Portland and the surrounding areas.

What outcomes and benefits will your project have for the community?

Improved reliability, reduction in operating costs .

Demonstrate how your project promotes community development and participation by connecting people, increased opportunity and building community capacity.

This project will demonstrate to the wider community that the Pool is going to be available in the longer term.

What community consultation has confirmed the need for this program?

The pool is a community owned asset that is run by a community elected committee.

The need for the project has been recognised by the committee in consultation with Equipment suppliers.

List the organisations actively involved in the project / program.

ORGANISATION	CONTACT PERSON	Contact telephone number



TIP

You can submit supporting documentation with your application to show how other organisations support your project.

You should include estimates of the cash and in-kind contributions you are making to the project and any other income you are applying for/expecting to receive from other grant sources. You may submit your budget as a separate attachment if you prefer.

If you are purchasing equipment or are planning a capital improvement to an asset, 2 quotations for the goods/ services need to be attached to your application.

SECTION 4: IMPLEMENTATION SCHEDULE

Detail your plan for project development, implementation and project management.

[illegible]

SECTION 5: DECLARATION – ALL applicants to complete this section.

On behalf of: Portland and District Olympic Pool
(name of the organisation, if applicable)

I declare that the information provided above is complete and correct.

Signed: Graeme Glazebrook

Print Name: Graeme Glazebrook

Position in organisation: Treasurer

Address: 46 Wallerawang Rd

Portland. NSW.2847

Contact telephone numbers: 0438 501 611

Email address: graeme.glazebrook@bigpond.com

Date: 31st October, 2018

104 Hall Drive
 Menai NSW 2234
 ABN: 46366430488
 Phone: 0425 842 971
 robin@southernaquatic.com.au
 Accounts: sue@southernaquatic.com.au

Southern Aquatic Services

For: Portland & District Olympic Pool Association
 mcouzer@bigpond.com
 PO Box 123,
 Portland NSW 2847
 Attention: Shane Taylor

Estimate No: 389
 Date: 23/04/2018

Description	Quantity	Rate	Amount
Work carried out at Portland Swimming Pool	1	\$0.00	\$0.00
Main Circulation Pump.	1	\$0.00	\$0.00
<p>The existing Main Circulation Pump is well past its serviceable life span and highly advise to replace</p> <p>The location of the pump make it impossible to operation because of the access (Confined Space).</p> <p>We are proposing to replace the pump completely, replacing the Pre Pump Strainer, also located in the pit and replacing the pipework to suit.</p> <p>The New Pump and Strainer will be located in the existing plant room but at the plant room floor level, the suction pump will need to be raised up to meet the new level.</p> <p>The Pump and Strainer will need to be mounted on a new frame (fabricated by others) fixed to the plant room floor and walls</p>			
Materials	1	\$0.00	\$0.00
Davey Close Coupled Motor Pump Duty 40 -50 l/sec at 7mH	1	\$15,990.00	\$15,990.00
Pre Pump Strainer, Poly construction Clear Lid Stainless steel basket	1	\$3,650.00	\$3,650.00
Pipework modifications required, inc, PVC Pipe and fittings, isolation and check valves, bracket and supports	1	\$5,000.00	\$5,000.00
Labour	1	\$5,040.00	\$5,040.00
Subtotal			\$29,680.00
GST 10%			\$2,968.00
Total			\$32,648.00
Total			\$32,648.00