

Dundonnell Wind Farm Community Fund

Application for Support

Please write clearly using black pen if completing by hand.						
Applicant Name:						
Contact Person:						
Physical Address:						
Phone:	Emai	l:				
Mobile Phone:	Fax:					
Project Location/s:						
Project Start Date:	Prop	osed Finishing Date:				
Amount of funding being requested (max. \$25,000):						
Your Bank Payment Details:	BSB:	Account:				
Reason for Application (attach additional pag	ges if required):					



Anticipated Outcomes/Benefits:

attach additional pages if require	ed)			
ATTACH Q	UOTES AND THEIR	R BANK DETAILS FOR DIRECT PA	YMENT	
oject Cost: Inc. GST				
_abour:			\$	
Materials:			\$	
Equipment:			\$	
Other:			\$	
		Total of Project Costs	\$	
Other Grants: Applied or Ap	oplying for (if any):	\$		
Your Contributions:		Hours (or)	\$	
Volunteer Contributions:		Hours (or)	\$	
		Total	\$	
Total Project Cost:			\$	
Grant Payment – DDWF Community Fund Commi		ttee Use	\$	
Certify that the information juidelines.	concerning this applic	ation is true and correct, and in-line with	the application	
Signed:		Full Name:		
Date:				
For office use	Cheque No.			
Cheque made out to	\$			
Cheques made out to	\$			
Date Received:		Date Approved:		
ommittee Member:				

Please retain a copy for your records and send the original application form to:

Tilt Renewables – Dundonnell Wind Farm Community and Education Fund

Email: <u>DDWFcommunityfund@tiltrenewables.com</u> or post: GPO Box 16080, Collins Street West, Melbourne 8007

PH: 1800 WE TILT (938 458)