Eligibility Checklist

* indicates a required field

Before proceeding with this application, please ensure you comply with all of the criteria below, in accordance with the <u>Guidelines</u>. If you cannot answer "Yes" to any of the questions below, it may indicate that you are ineligible to apply. If you are unsure about eligibility, please ring Business Tasmania on 1800 440 026.

Have you read and understood the Program Guidelines?

⊖ Yes

Do you comply with the Program Guidelines? *

○ Yes

Applicants that have previously been approved under this Program should pay particular attention to their eligibility.

Do you meet the definition of a Tasmanian Business as specified in the Program Guidelines? *

⊖ Yes

A business that has products and services produced, transformed or value-added in Tasmania and are, or are intended to be, despatched from Tasmania.

At the time of applying are you a financially viable entity? *

⊖ Yes

A financially viable entity is one that is NOT under external administration, been appointed a liquidator, being wound up, dissolved or trading insolvent.

Do you confirm that, for the activity that is the subject of this application, you have not received or plan to make a claim for funding under the Australian Government's Export Market Development Grants (EMDG) Scheme or any other government or industry organisation assistance scheme. *

Where did you hear about this program? *

- □ Tasmanian Government website or e-mails
- □ Radio
- Newspaper
- □ Social Media
- □ Another business
- \Box Other (please specify below).

At least 1 choice must be selected.

Do you have annual sales turnover (revenue generated) that:

- is greater than \$150,000 in at least one of the two last financial years, or the current financial year; OR have you been approved to participate in a Tasmanian Government-facilitated event (trade mission, trade show etc) through an Expression of Interest process (or similar)

AND

- has never exceeded \$10 million (unless approved through an expression of interest process (or similar) to take part in Tasmanian Government-facilitated events, such as trade missions, trade shows etc, or can present an exceptional business case for funding, with highly likely and significant trade outcomes)?

*

- ⊖ Yes
- O No

Applicant Details

* indicates a required field

Applicant Information

Business Name *

Organisation Name

Type of Entity *

- Private Company
- Trust
- Partnership
- Sole Trader

○ Other

Ineligible applicants include: any government body including local councils, government agencies, Government Business Enterprises and consultants or intermediaries.

If applicant is a Trust please attach a copy of the Trust Deed and any amendments.

Attach a file:

Multiple files can be attached.

Applicant's 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.

Business Address * Address

Must be a Tasmanian Postcode

Postal Address *

Address

Must be a Tasmanian Postcode

Business Phone Number *

Business Email *

Website

Project Contact *

Title First Name Last Name

Project Contact Position *

Project Contact Phone Number *

Project Contact Email *

Details of the Business

* indicates a required field

Please outline the Tasmanian operations of your business and your previous trade, marketing and business development experience and successes along with a description of future plans. If you have this information contained in a RELEVANT document such as a business plan, marketing strategy, export strategy or similar you may attach it below. *



Must be no more than 600 words.

Please attach any business plan, marketing strategy, export strategy or similar documents that are RELEVANT to your application. Attach a file:

Multiple files can be attached.

Employment Structure

Total Headcount *

Must be a number.

Total Full Time Equivalents (FTE's) *

Must be a number.

Sales by Region

List of markets	Current Financial Year (To Date)	Last Full Financial Year	Previous Full Financial Year (-2)
Tasmania	\$		\$
Australian Mainland	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
List additional export markets (countries) above.	Must be a dollar amount.	Must be a dollar amount.	Must be a dollar amount.

Sales by Market

Total Current Financial Year \$ This number/amount is calculated. Total Last Full financial Year \$ This number/amount is calculated. Total Previous Full Financial Year (-2)

This number/amount is calculated.

\$

Proposed Activity

* indicates a required field

About the project

Describe the activity for which funding is requested. You should be as specific as possible (for example, rather than 'event attendance' you should indicate where, when and what the event is). Activities should align with the 'Eligible Expenditure' outlined in the Program Guidelines. *

Word count: Must be no more than 500 words.

Please attach any documents that are RELEVANT to the project (including an itinerary if you are seeking support for travel and/or on-ground expenses). Attach a file:

Outline how the proposed activity aligns with your longer term business strategies and objectives. *

Word count: Must be no more than 300 words.

What geographic markets are being targeted by this activity? *

Word count: Must be no more than 100 words.

Please indicate which of the following applies. Are you: *

- □ Entering a new market
- Entering an existing market with a new product
- □ Re-entering/re-establishing in an existing market post COVID-19

At least 1 choice must be selected.

Please outline the findings of any market research supporting this activity. *

Word count: Must be no more than 300 words.

Please outline any potential partners and key stakeholders (in Tasmania or inmarket).

Word count: Must be no more than 200 words.

What are the expected outcomes? (including specific opportunities for increased sales and/or increased brand awareness). *

Word count:

Must be no more than 300 words. Include estimated dollar amounts and timeframes for increased sales, and likely exposure/reach for increased brand awareness

Project Start Date *

Must be a date. Should be at least three (3) weeks from application date.

Project End Date *

Must be a date. Projects due for completion more than 12 months in advance of the application date may be considered ineligible.

List the tasks, activities and budget for the project/activity for which you are applying for funding

Refer to the <u>Guidelines</u> for an indication of expense items that may be eligible under the program and the maximum claimable grant amount for particular expense items.

DO NOT INCLUDE any on-ground expenses including accommodation, meals, beverages and transport (taxis etc) in this table. These are supported through the 'On-ground expenses - per day allowance', claimable later in this form, and will not be approved for grant funding as stand alone items.

(A) Expense item	(B) Estimated Cost of Expense Item	Comments/Basis of Estimate	Grant Funding Requested (50% of column B)
	\$		\$
	\$		\$
	\$		\$

\$	\$
\$	\$
Must be a dollar amount.	Must be a dollar amount.

\$

Budget Totals

Total Expenses (from above table)

\$ This number/amount is calculated.

Grant Funding Requested (from above table)

This number/amount is calculated. EXCLUDING any per day allowance, to be claimed below

On - Ground Expenses - Per Day Allowance

If you intend claiming the on-ground expenses – per day allowance you should ensure you have included an itinerary, in the 'About the project' section above, detailing the relevant activities to be undertaken (e.g. Day 1: fly to destination, meet with 3 potential clients ABC, XXX and XYZ; Day 2: attend trade show, present to 5 distributors; Day 3: exhibition pack-up and return travel to Tasmania).

	es If yes, how many nights will you be spending	Total on-ground expenses claimed
per day allowance? * Yes 	outside of Tasmania in conducting the activity for which you are applying?	\$
□ No At least 1 choice and no more		This number/amount is calculated.
than 1 choice may be selected.	The maximum number of nights away that can be claimed is seven (7).	

How much funding do you wish to apply for?

Total Grant Amount Requested *

\$

This number/amount is calculated. Up to a maximum of \$10,000. This amount should total the grant funding requested from the task, activity and budget table plus the total on-ground expenses claimed.

Declaration and Privacy Statement

* indicates a required field

Please refer to the program Guidelines for the full conditions to this grant

The term 'Application' means this on-line form and all attached documents.

For and on behalf of the applicant detailed in this application, I, the undersigned, acknowledge and warrant (as the case may be) that:

1.I have authority to provide the information contained in this application and to execute (by completion of details below) this application for and on behalf of the applicant.

- 2.The department can rely upon the information and representations contained in this application (including these acknowledgements).
- 3.I have read, understood and I am able to comply with all criteria, terms and conditions contained in the guidelines and application form.
- 4.I have read and understood the eligibility requirements and assessment criteria for this program and declare to the best of my information, knowledge and belief, the applicant is eligible under those criteria and the information provided is true and correct.
- 5.The department may undertake all necessary credit checks, organisational searches and any other checks and enquiries on the applicant as the department determines and is hereby authorised to do so.
- 6.The application is made at the applicant's own cost and risk, the selection of the applicant for program funds is at the absolute discretion of the department and this application remains the property of the department.
- 7.The applicant will be responsible for notifying the department in writing of any changes relating to information provided in this application. Until receipt of such notification, the department shall process the application in accordance with the information provided.
- 8.Grant payments will be made via Electronic Funds Transfer (EFT) to a nominated bank account and the department is hereby authorised to make such payments.
- 9. The department is under no obligation to verify the authority of the undersigned on the bank account details.
- 10. The department will not be held responsible for delays of payment, or errors due to factors outside their reasonable control. The department reserves the right to terminate or suspend an EFT and to pay by cheque or any other manner which the department may determine.
- 1 The applicant agrees to indemnify the Crown in the Right of Tasmania, against all present and future legal liability, claims or proceedings for financial loss arising from, or attributable to the provision and use of the information contained in this application and/or receipt and use of grants from the Accelerating Trade Grant Program.
- 12f a grant is awarded, the applicant acknowledges that the guidlelines for this program and the information provided within this application will form an agreement between the applicant and the Crown in the right of Tasmania.

Right to information

Information you provide to the Department of State Growth and details of assistance may be subject to requests for public disclosure under the <u>*Right to Information Act 2009* (Tasmania</u>).

Personal information collection

You are providing personal information to the Department of State Growth, which will manage that information in accordance with the <u>Personal Information Protection Act 2004</u>. The personal information collected here will be used by the Department for the purpose of assessing your application and related activities. Failure to provide this information may result in your application not being assessed or records not being properly maintained. The Department may also use the information for related purposes, or disclose it to third parties in circumstances allowed for by law. You have the right to access your personal information by request to the Department and you may be charged a fee for this service.

I agree *

⊖ Yes

Authorised Person Completing this Application *

Title	First Name	Last Name

Position *