Local Heritage Fund Application 2023/2024



APPLICANT DETAILS					
Name					
Address					
Phone Number _ Email Address _		Mobile Number			
OWNERS AUTHORISA	TION				
Owners Name					
Owners Signature					
Note: This form n	nust be signed by every perso	on who has an interest in the land as an ow	ner or part owner.		
PROJECT DETAILS					
Project Name/Description					
House No Street/ Road					
Suburb:	Post C	ode:			
Lot No	Section:	_ Deposited Plan			
Project Details					
The item is included in the	ne Heritage Study/Council	's Local Environmental Plan	🗌 Yes 🗌 No		
The item is supported by as being of heritage sigr		Advisor or other heritage specialist	🗌 Yes 🗌 No		
To be eligible for fundi	ing you must answer YE	S to all of the following			
I will complete and claim	n my project funding by 30	June 2024	🗌 Yes 🔲 No		
I acknowledge that I may these works (separately		uncil and/or Heritage Act approval for	🗌 Yes 🔲 No		
I agree to erect a Counc	il sign acknowledging fund	ding assistance received for a period o	f 🗌 Yes 🗌 No		

YOUR PROJECT

Provide a short summary about what you will achieve with your project. What do you want to do with the funding?

Parkes Shire Council ABN 96 299 629 630

2 Cecile Street (PO Box 337) T 02 6861 2333 Parkes NSW 2870

F 02 6862 3946

council@parkes.nsw.gov.au parkes.nsw.gov.au



Project Scope & Itemised Costing - Attach your project scope and itemised costings as we all as other supporting information.

Digital photos or loose photos - Attach digital photos of your project

PROJECT FUNDING	
Total Project Cost	\$
How much are you contributing? How much funding are you requesting?	\$ \$
SELECTION CRITERIA FOR ALL PROJ Sustainable long term heritage benefits	

Public benefit and enjoyment

Describe how your project will lead to a positive change in community attitudes and actions towards heritage.

Innovation and leadership

Describe how your project will lead to a positive change in community attitudes and actions towards heritage.

Capacity and commitment to undertake the project	
Do you have the necessary time, project and financial management skills to successfully undertake this project?	🗌 Yes 🗌 No
Will your project be completed within the funding time frame and be fully claimed by 30 June 2024?	🗌 Yes 🗌 No
Funding equity and cost effectiveness	
Will your project proceed without this funding assistance?	🗌 Yes 🔲 No
Are you receiving funding or support from other sources? If yes, please name	🗌 Yes 🗌 No
Urgent Work	
Will your project assist to avert a threat to a heritage item? Or works to meet Building Code of Australia requirements? If yes, please detail:	🗌 Yes 🗌 No
Received little or no previous funding	
I have received Council funding support for this heritage item in the last 5 years. If yes, please detail	🗌 Yes 🗌 No

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LOCAL COUNCIL CONTACT	
I have discussed my project with the Council heritage officer advisor before lodging this application	🗌 Yes 🗌 No
Name of Council Contact:	
Will your project assist to avert a threat to a heritage item? Or works to mee of Australia requirements? If yes, please detail:	t Building Code
APPLICANTS DECLARATION	
I confirm that all the information provided in this project application is true ar to the best of my knowledge.	nd correct
I have completed ALL questions on this project application.	🗌 Yes 📋 No
I have attached ALL requested summaries and other information.	🗌 Yes 🔲 No
Applicant Checklist (please tick) Schedule of Works Names of Tradespeople Two (2) quotes obtained Plans and sketches Photographs	
Applicant Signature	
Date	

QUESTIONS

Contact Council's Planning Officer on (02) 6861 2373 or by email council@parkes.nsw.gov.au

