

# Delegated Authority for Lotterywest and or Healthway grants



This form is to be completed by the organisation's legal signatories, only if you choose to give the responsibility for signing Lotterywest and or Healthway Grant Conditions, Letter of Offer, Agreements and acquittal documentation to someone else within your organisation. We refer to the person nominated for responsibility as the 'Delegated Authority'.

Please note: once you complete and submit this information, it will remain on our records for current and future grant applications. You will only need to complete this form again if your 'Delegated Authority' or legal signatories change.

In completing this form you are confirming that:

- You are the persons legally responsible to enter into contracts on behalf of your organisation according to your organisation's constitution or as bound by law.
- That you authorise the nominated person in this form to sign:
  - Lotterywest and or Healthway Grant Conditions/Letter of Offer/Agreements
  - Apply for payments, variations or extensions of a Lotterywest and or Healthway grant
  - Endorse acquittal documentation associated with a Lotterywest and or Healthway grant.
- The Delegated Authority has been made fully aware of the responsibilities assumed by this delegation and signing of Lotterywest and or Healthway Grant Conditions, Letter of Offer and Agreements.

## 1. I (the current legal signatory)

Title

Name

Role/Position

For (organisation's legal name)

Signature

Date

 /  / 

Telephone

Mobile

Email

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## 2. I (the other current legal signatory)

Title    Name

Role/Position

For (organisation's legal name)

Signature  Date   /   /

Telephone  Mobile

Email

## 3. Authorise the below to act as a Delegated Authority

Title    Name

Role/Position

Postal Address

Suburb  State    Postcode

Telephone  Mobile

Email

### Where to send your form:

This form can be signed, scanned and attached to your Grant Application Form, uploaded in the Grants Portal or Signed and returned by email [grants@lotterywest.wa.gov.au](mailto:grants@lotterywest.wa.gov.au) or [healthway@healthway.wa.gov.au](mailto:healthway@healthway.wa.gov.au)

### Contact us:

Call 133 777

Or email [grants@lotterywest.wa.gov.au](mailto:grants@lotterywest.wa.gov.au) or [healthway@healthway.wa.gov.au](mailto:healthway@healthway.wa.gov.au)