Hea	althy Spaces -	Venue	S
ID:			
۸cc	essor.		

Requested Amount: Status: Draft

Status

Draft

Before You Begin

Before starting your funding request, please make sure your organisation's details are up to date, such as:

- Latest Financial Statement
- Annual Report or AGM minutes
- Legal signatory details and other governance documents.

If you need to update any of these details, please select [Save and Close] at the bottom of this page and then select your organisation under the Organisation heading in the menu on the left-hand side of your screen.

Your organisation's details will need to be verified by our Customer Service team, which will take up to two business days. You will be able to submit your funding request once your organisation has been validated.

How to Submit

Please click on [Save and Close], and when the page has closed, please click on [Submit] at the bottom of your screen.

Please Note

The Portal does not automatically save your work, so please make sure you click on either [Save] or [Save and Close] button below before you exit out of the Portal.

Bold denotes a mandatory field.

▼ Table of Contents

Organisation Information
Venue location(s) and number of outlets
Partnerships
Co-Supporters
Documents

▼ Organisation Information

Before starting your request, please review your organisation's details, this includes:

- Latest Financial Statement
- Annual Report or AGM minutes
- Latest list of Board and Committee members and other governance documents.

If you need to update any of these details, please select [Save and Close] at the bottom of this page and then select 'Organisation' in the left-hand menu. Once you can confirm that your organisation's details are up-to-date, please tick the box below.

I have reviewed my organisation's information in the Portal and have provided updated information where needed.

False

People added to your organisation using the "Add New" function below will be instantly granted access to the Grants Portal and will be able to view your organisation's information including requests, grants and payment information.

Organisation:

Organisation Status:

Warning: Organisation is not in a Validated status. It will need to be validated to submit this request please follow up on the status of your Organisation, or link one that is validated.

Primary Contact:

Legal Signatory:

Secondary Legal Signatory:

Person Applying:

If you are adding a new Legal Signatory, please attach documentation confirming their position by clicking on '+'. Click for more information around Legal Signatories.

LEGAL SIGNATORIES

Delegated Authority

A Delegated Authority can also perform the duties of a Legal Signatory provided they have been given the authority from a Legal Signatory(s). A copy of the Delegated Authority form can be found here. For the purpose of this request, does the Legal Signatory(s) give responsibility for signing the Healthway Grant Conditions, Agreements and acquittal documentation to someone else within your organisation?

Delegated Authority in place?

▼ Venue location(s) and number of outlets

Project Title:

Please select the '+' on the right to enter your venues' details (you can add more than one venue).
Please click on save once you have added your venues' details. Once you have added all your venues,
please click save at the bottom of the page.

Venue

Total: \$0.00

Additional Venue Information

If relevant, please provide additional information regarding your specific venue(s):

Please click save at the bottom of the page after adding the field above.

▼ Partnerships

We recommend that you consult with your local Health Service Provider and/or the Western Australian School Canteen Association (WASCA) prior to submission of your request. Contact details are provided in the Healthy Venues Guidelines.

Have you liaised with your local Health Service Provider, WASCA or other partner regarding this request?

Please select the primary region(s) in WA that will benefit from this grant. Note: if more than three regions apply, please select Statewide.

▼ Co-Supporters

Does your Organisation have any proposed or confirmed dealings, arrangements or contracts with organisations that seek to promote, advertise or endorse alcohol, unhealthy food or drinks, gambling or tobacco/ecigarette products?

▼ Documents

Please upload the following by clicking on the '+' button below:

- Current food and drink outlet(s) menu(s) for each venue
- Photographs of the current food service outlet(s) for each venue
- If your venue has a retail food and drink outlet that is managed by a third party, please attach a written commitment from the food service manager who is contracted to provide retail food at your venue for your 'Healthy Venues Project

If you have any other supporting documents, please upload them by clicking on the '+' button in the Supporting Documents box below.

Food and Drink Outlet Menu

Photographs - Food Service Outlet

SUPPORTING DOCUMENTS

Conditions of Funding

You are required to complete and submit a Healthway Conditions of Funding form as part of this request. Please note this document must be signed by your legal signatory(s). Click here for more information about who can sign the Conditions of Funding.

Organisation/entity type	Signatory requirements
Incorporated groups	President/Chairperson and co-signed by a committee member
Aboriginal Corporations For Profit Company Not for Profit Companies Not for Profit Trusts	Two Directors, or One Director and a Company Secretary
Local Government Authority (LGA)	Chief Executive Officer

Legal Signatory(s) listed against your organisation: Delegated Signatory(s) listed against your organisation:

Please note: if your Condition of Funding is not signed by the correct legal signatory(s), your request may be delayed.

Conditions of Funding

Please click on [Save and Close], and when the page has closed please click on [Submit] at the bottom of your screen.