

Monsoon Trough Disaster Recovery Grant - Resilience Funding Form Preview

Eligibility

* indicates a required field

The Small Business Disaster Recovery Grants Program (the Program) will provide \$3 million for up to two years for small businesses impacted by the North and Far North Queensland Monsoon Trough disaster event that occurred from 25 January to 14 February 2019. This assistance will enable eligible small businesses to engage expertise to help them recover and to rebuild business confidence.

Grants of up to \$10,000 will be available for small businesses to access in accordance with specific eligibility criteria aligned to assistance provided under the Australian Government's Disaster Recovery Funding Arrangements (DRFA).

Before completing this form, visit [Small Business Disaster Recovery Grants at www.business.qld.gov.au/recovery](http://www.business.qld.gov.au/recovery) and ensure you have read the Application Guidelines.

All applications must be made by completing this application form on SmartyGrants and submitting online according to instructions. Incomplete applications will not be considered. The application form can be saved and completed later. It is recommended you save your work frequently.

I have read and understood the Small Business Recovery Grants Application Guidelines and I acknowledge I am applying for Resilience Funding. *

Yes

If you cannot answer 'Yes' to the statements below you are not eligible for this grant funding, and will not be able to submit the application form

Please provide the address of the business premises impacted by the Monsoon Trough *

Address

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Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Coordinates Required. Country must be Australia

Local Government Areas (LGA)

I confirm that my eligible LGA is. *

- | | | |
|---|--|---|
| <input type="radio"/> Burdekin Shire Council | <input type="radio"/> Croydon Shire Council | <input type="radio"/> McKinlay Shire Council |
| <input type="radio"/> Burke Shire Council | <input type="radio"/> Douglas Shire Council | <input type="radio"/> Richmond Shire Council |
| <input type="radio"/> Carpentaria Shire Council | <input type="radio"/> Etheridge Shire Council | <input type="radio"/> Townsville City Council |
| <input type="radio"/> Charters Towers Council | <input type="radio"/> Flinders Shire Council | <input type="radio"/> Winton Shire Council |
| <input type="radio"/> Cloncurry Shire Council | <input type="radio"/> Hinchinbrook Shire Council | |

Please select relevant LGA

I confirm my business had less than 20 employees on 1 January 2019 *

- Yes

Please use a simple headcount, do not allow for part-time or full-time. Do not include contractors.

I confirm my business has a currently active ABN and is registered for GST *

- Yes

To be eligible the business must have an ABN and be registered for GST

I confirm the business does not have any owners or directors who are an undischarged bankrupt or are insolvent *

- Yes

I confirm this is the only application to the Monsoon Trough Disaster Recovery Grant - Resilience Funding for this ABN and business address *

- Yes

I confirm the Monsoon Trough affected the business' capacity to operate *

- Yes

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Eligibility assessment

The following questions and evidence requires you to refer to Table 1: Eligibility in the Application Guidelines (page 2 and top of page 3).

Consider your category, LGA eligibility and the evidence required for assessment.

Which category of DRFA Assistance applies to your situation *

- Received Category C assistance (directly inundated; approved for Special Disaster Recovery Grant)
- Not eligible Category C assistance (indirectly impacted)
- Received, or eligible to receive, Category B assistance; Not eligible Category C (directly inundated, approved for, or eligible to apply for, Disaster Assistance Small Business Loan)
- Not eligible Category B or C assistance (indirectly impacted)
- Did not receive DRFA assistance but business in eligible LGA

Evidence

Please upload the evidence required for assessment - please refer to the Application Guidelines

Evidence 1 *

Attach a file:

Please provide any comments or additional information about this evidence that may assist in the assessment process

Evidence 2

Attach a file:

Please provide any comments or additional information about this evidence that may assist in the assessment process

Evidence 3

Attach a file:

Please provide any comments or additional information about this evidence that may assist in the assessment process

Evidence 4

Attach a file:

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Please provide any comments or additional information about this evidence that may assist in the assessment process

Business and Applicant Details

* indicates a required field

Business Contact Details

Business Name/Trading Name *

Organisation Name

Australian Business Number (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.

Please note, the above ABN lookup is extracted from the Australian Business Register (ABR) <http://abr.business.gov.au/>. If the details listed in the ABR extract above do not meet the eligibility criteria at the time of submission, **your application will be deemed ineligible.**

Street Address *

Address

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Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Coordinates Required. Country must be Australia

This field requires a street number and name, suburb/town, state and postcode. The field will auto-populate after you start typing an address, and you can either select the appropriate address from the drop down list, or locate your address by moving the pin. Do NOT enter a building name or number, unit/lot number, or post office box number.

Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Phone Number *

(XX) XXXX XXXX or XXXX XXX XXX

Secondary phone number

(XX) XXXX XXXX or XXXX XXX XXX

Business Email address *

Must be an email address. Please note: the outcome of your application will be sent to this email address.

Website

Must be a URL

Which industry sector (ANZSIC code) does your business fall under *

<https://www.ato.gov.au/Calculators-and-tools/Business-industry-code-tool/AnzsicCoder.aspx>

Describe your business including the products or services it provides and your target market. *

Word count:

Must be no more than 100 words.

How many employees did the business have on 1 January 2019? *

Must be a whole number and between 0 and 19. Please provide a simple headcount, do not try to allow for part-time or full-time. Do not include contractors.

Does your business identify as working within the following sectors

Tourism

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- Social Enterprise
- National Disability Insurance Scheme (NDIS)

This question is for reporting purposes only.

Diversity

Is your business 50% or more owned by Aboriginal or Torres Strait Islander people? *

- Yes No

Are you a member of Supply Nation? *

- Yes No

Are you registered on Black Business Finder? *

- Yes No

Please indicate if the owner operator/s of the business identifies as any of the following *

- Women in business
- People with a disability in business
- Young people in business
- Seniors in business
- Culturally and linguistically diverse
- None of the above
- Other:

This question is for reporting purposes only

Applicant Contact Details

Name *

Title First Name Last Name

Position *

Daytime Phone Number *

Must be an Australian phone number.
(XX) XXXX XXXX or XXXX XXX XXX

Mobile Phone Number

Must be an Australian phone number.
(XX) XXXX XXXX or XXXX XXX XXX

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Applicant Contact Email *

Must be an email address.

Impact on trading immediately following the Monsoon Trough

* indicates a required field

How many days was the business closed? *

Must be a number.
If none enter zero.

What is the estimated income loss to date? *

Must be a number.
If there was no loss of income enter zero.

Did you need to reduce staff, if so how many? *

Must be a number.
If none enter zero.

What are the estimated trading hours lost to date? *

Must be a number.

Are you currently operating at 100% capacity? *

Yes No

What percentage capacity are you operating at? *

Must be a number and between 0 and 99.

Briefly describe the impact the Monsoon Trough Disaster had on your business? *

Project Details

* indicates a required field

Project title *

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Give the work to be undertaken a title to make it easier to reference. Must be no more than 15 words.
e.g. increase future resilience to natural disasters

Short project description *

Word count:

Must be no more than 300 words.

Provide a short description of your project. What services will the mentor, business coach, etc provide to your business to help your business recover, rebuild business confidence and future proof against future disaster events?

Supplier 1

* indicates a required field

Resilience funding - funding is available to eligible small businesses to engage a business consultant, mentor, coach or advisory service. Expertise and advice will be provided to assist with business recovery and resilience for future disaster events. Funding may also be available to support retraining of owners, managers or staff to implement sustainability or recovery plans.

Supplier 1 Business Details

What is the primary focus of this quotation? *

Develop a business plan Develop business continuity or recovery plans Receive mentoring or coaching Related training Financial counselling Explore new options for sustainability

Supplier 1 Business Details *

Supplier 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

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Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

Must be an ABN.

Please provide the ABN for the proposed supplier

Supplier 1 Proposal/Quote

Supplier 1 Quote Amount (excluding GST) *

\$

Must be a dollar amount.

Excluding GST

Any consultant's proposal must include the following detail:

- the services the adviser/s will provide, including a breakdown of key activities
- delivery timeframes
- adviser/s service delivery costs
- the payment schedule (including hourly or daily rates)
- the estimated number of consulting hours or days for each of the key activities
- names of key people who will undertake the project work.

Any proposal or quote that includes training must include the number of contact hours.

Where possible, quotations must be a formal quote on business letterhead.

A shopping cart print-out (including suppliers name) for online purchases is acceptable where a formal quote is not possible.

Are there any comments you would like to make about this quote that may assist in the assessment process? (Such as preferred option in a multi-option proposal.)

This question is not mandatory however it may help to clarify how you have calculated your requested grant amount if it is not clear in the quote.

Please upload a copy of the supplier's proposal or quote *

Attach a file:

Please make sure that you attach a copy of the proposal or quote as your application cannot be assessed until one is received.

Is there another quote? *

Yes

No

Supplier 2

* indicates a required field

Supplier 2 Business Name

What is the primary focus of this quotation? *

Develop a business plan Develop business continuity or recovery plans Receive mentoring or coaching Related training Financial counselling Explore new options for sustainability

Supplier Name *

Supplier 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.

Please provide the ABN for the proposed supplier

Supplier 2 Proposal/Quote

Supplier 2 Quote Amount (excluding GST) *

\$

Must be a dollar amount.

Excluding GST

Any consultant's proposal must include the following detail:

- the services the adviser/s will provide, including a breakdown of key activities
- delivery timeframes
- adviser/s service delivery costs
- the payment schedule (including hourly or daily rates)

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- the estimated number of consulting hours or days for each of the key activities
- names of key people who will undertake the project work.

Any proposal or quote that includes training must include the number of contact hours.

Where possible, quotations must be a formal quote on business letterhead.

A shopping cart print-out (including suppliers name) for online purchases is acceptable where a formal quote is not possible.

Are there any comments you would like to make about this quote that may assist in the assessment process? (Such as preferred option in a multi-option proposal.)

This question is not mandatory however it may help to clarify how you have calculated your requested grant amount if it is not clear in the quote.

Please upload a copy of the supplier's proposal or quote *

Attach a file:

Please make sure that you attach a copy of the proposal or quote as your application cannot be assessed until one is received.

Is there another quote? *

Yes No

If No then please proceed to the Total amount requested page.

Supplier 3

* indicates a required field

What is the primary focus of this quotation? *

Develop a business plan Develop business continuity or recovery plans Receive mentoring or coaching Related training Financial counselling Explore new options for sustainability

Supplier Name *

Supplier 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

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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.
Please provide the ABN for the proposed supplier.

Supplier 3 Proposal/Quote

Consultant 3 Quote Amount (excluding GST) *

\$

Must be a dollar amount.
Excluding GST

Any consultant's proposal must include the following detail:

- the services the adviser/s will provide, including a breakdown of key activities
- delivery timeframes
- adviser/s service delivery costs
- the payment schedule (including hourly or daily rates)
- the estimated number of consulting hours or days for each of the key activities
- names of key people who will undertake the project work.

Any proposal or quote that includes training must include the number of contact hours.

Where possible, quotations must be a formal quote on business letterhead.

A shopping cart print-out (including suppliers name) for online purchases is acceptable where a formal quote is not possible.

Are there any comments you would like to make about this quote that may assist in the assessment process? (Such as preferred option in a multi-option proposal.)

This question is not mandatory however it may help to clarify how you have calculated your requested grant amount if it is not clear in the quote.

Please upload a copy of the supplier's proposal or quote *

Attach a file:

Please make sure that you attach a copy of the proposal or quote as your application cannot be assessed until one is received.

Is there another quote? *

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Yes

No

If No then please proceed to the Total amount requested page.

Supplier 4

* indicates a required field

Supplier 4 Business Details

What is the primary focus of this quotation? *

Develop a business plan Develop business continuity or recovery plans Receive mentoring or coaching Related training Financial counselling Explore new options for sustainability

Supplier Name *

Supplier 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.

Please provide the ABN for the proposed supplier.

Supplier 4 Proposal/Quote

Supplier 4 Quote Amount (excluding GST) *

\$

Must be a dollar amount.

Excluding GST

Any consultant's proposal must include the following detail:

- the services the adviser/s will provide, including a breakdown of key activities

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- delivery timeframes
- adviser/s service delivery costs
- the payment schedule (including hourly or daily rates)
- the estimated number of consulting hours or days for each of the key activities
- names of key people who will undertake the project work.

Any proposal or quote that includes training must include the number of contact hours.

Where possible, quotations must be a formal quote on business letterhead.

A shopping cart print-out (including suppliers name) for online purchases is acceptable where a formal quote is not possible.

Are there any comments you would like to make about this quote that may assist in the assessment process? (Such as preferred option in a multi-option proposal.)

This question is not mandatory however it may help to clarify how you have calculated your requested grant amount if it is not clear in the quote.

Please upload a copy of the supplier's proposal or quote *

Attach a file:

Please make sure that you attach a copy of the proposal or quote as your application cannot be assessed until one is received.

Is there another quote? *

Yes

No

If No then please proceed to the Total amount requested page.

Supplier 5

* indicates a required field

What is the primary focus of this quotation? *

- Develop a business plan Develop business continuity or recovery plans Receive mentoring or coaching Related training Financial counselling Explore new options for sustainability

Supplier Name *

Supplier 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

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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.

Supplier 5 Proposal/Quote

Supplier 5 Quote Amount (excluding GST) *

\$

Must be a dollar amount.

Excluding GST

Any consultant's proposal must include the following detail:

- the services the adviser/s will provide, including a breakdown of key activities
- delivery timeframes
- adviser/s service delivery costs
- the payment schedule (including hourly or daily rates)
- the estimated number of consulting hours or days for each of the key activities
- names of key people who will undertake the project work.

Any proposal or quote that includes training must include the number of contact hours.

Where possible, quotations must be a formal quote on business letterhead.

A shopping cart print-out (including suppliers name) for online purchases is acceptable where a formal quote is not possible.

Are there any comments you would like to make about this quote that may assist in the assessment process? (Such as preferred option in a multi-option proposal.)

This question is not mandatory however it may help to clarify how you have calculated your requested grant amount if it is not clear in the quote.

Please upload a copy of the supplier's proposal or quote *

Attach a file:

Please make sure that you attach a copy of the proposal or quote as your application cannot be assessed until one is received.

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Is there another quote? *

Yes

No

If No then please proceed to the Total amount requested page.

Supplier 6

* indicates a required field

Supplier 6 Business Details

What is the primary focus of this quotation? *

Develop a business plan Develop business continuity or recovery plans Receive mentoring or coaching Related training Financial counselling Explore new options for sustainability

Supplier 6 Business Name *

Supplier 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.

Please provide the ABN for the proposed supplier.

Supplier 6 Proposal/Quote

Supplier 6 Quote Amount (excluding GST) *

\$

Must be a dollar amount.

Excluding GST

Any consultant's proposal must include the following detail:

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- the services the adviser/s will provide, including a breakdown of key activities
- delivery timeframes
- adviser/s service delivery costs
- the payment schedule (including hourly or daily rates)
- the estimated number of consulting hours or days for each of the key activities
- names of key people who will undertake the project work.

Any proposal or quote that includes training must include the number of contact hours.

Where possible, quotations must be a formal quote on business letterhead.

A shopping cart print-out (including suppliers name) for online purchases is acceptable where a formal quote is not possible.

Are there any comments you would like to make about this quote that may assist in the assessment process? (Such as preferred option in a multi-option proposal.)

This question is not mandatory however it may help to clarify how you have calculated your requested grant amount if it is not clear in the quote.

Please upload a copy of the supplier's proposal or quote *

Attach a file:

Please make sure that you attach a copy of the proposal or quote as your application cannot be assessed until one is received.

Total project cost: total of supplier/s quote amount/s (excluding GST)

\$

This number/amount is calculated.

If the amount is incorrect please check the amounts in the Supplier section/s.

Enter your total requested grant amount: this amount should be the 'total project cost' up to a maximum of \$10,000 (excluding GST)

\$

Must be a dollar amount.

Please note this should not exceed \$10,000.

I acknowledge the 'total project cost' and 'total grant amount requested' is subject to an compliance check. This could result in a change to the 'total requested grant amount' above. *

Yes

Total cost

* indicates a required field

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Total project cost: total of supplier/s quote amount/s (excluding GST) *

\$

This number/amount is calculated.

If the amount is incorrect please check the amounts in the Supplier section/s.

Enter your total requested grant amount: this amount should be the 'total project cost' up to a maximum of \$10,000 (excluding GST) *

\$

Must be a dollar amount and no more than 10000.

What is the total financial support you are requesting in this application?

I acknowledge the 'total project cost' and 'total grant amount requested' is subject to an compliance check. This could result in a change to the 'total requested grant amount' above. *

Yes

Applicant Declaration and Submission

* indicates a required field

Privacy Statement

The Department of Employment, Small Business and Training (DESBT) is collecting information to assess and coordinate grants in relation to the Small Business Disaster Recovery Grants.

DESBT, its officers, employees, agents and sub-contractors may use and disclose any of the information provided with the application to Queensland Government departments or agencies, Queensland Government bodies, non-government organisations and/or the Commonwealth, States or Territories for any purpose in connection with the administration of the Small Business Disaster Recovery Grants Program. Successful applications may also be the subject of media releases and disclosure as otherwise provided in the 'terms and conditions'.

Submitted documents may be subject to disclosure under the [Information Privacy Act 2009](#), subject to the exemptions under that Act.

This information is usually provided to authorised departmental officers and approved grant assessors under the [Financial Accountability Act 2009](#) for the purpose of assessing this application. They may provide all or some of the information to the Queensland Government to promote funded projects and may provide details of successful proposals, agreed outcomes, progress and level of funding for publication.

Your information will not be disclosed to any other parties unless authorised or required by law.

DESBT's Privacy Guide in relation to the treatment of personal information collected may be accessed online at www.desbt.qld.gov.au.

Conditions

I am aware of, and confirm my understanding and agreement to comply, with the following conditions:

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- the information supplied in this Small Business Disaster Recovery Grants - Resilience Funding application is true, accurate and not misleading to the best of my knowledge
- the applicant is not bankrupt or insolvent
- I have received no guarantees or assurances this Small Business Disaster Recovery Grants - Resilience Funding application will be approved by the Queensland Government
- I have read and understood the Small Business Disaster Recovery Grants Application Guidelines
- I have submitted supporting evidence as outlined in the Application Guidelines to support my application.
- I am aware the following activities are not eligible funding under the Small Business Disaster Recovery Grants:
 - leasing temporary premises to resume operations
 - fees for services provided by related parties (such as companies with common shareholdings or directorship with the applicant, and employees or immediate family of the applicant)
 - shareholder or franchisee fees
 - salaries
 - general business operating costs (including bookkeeping/accounting and tax returns)
 - purchase of assets, such as plant, equipment or stock, unless essential to resuming operations of the small business
 - advertising or marketing costs
- I have submitted all supporting documentation to support my application for funding
- I am authorised/delegated to make this declaration on behalf of my organisation.

Refer to the [Electronic Transaction \(Old\) Act 2001](#) prior to acknowledging and accepting this declaration.

I have read, understood, and agree to comply with the above conditions *

Yes

Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position *

Date *

Must be a date.

Submitting the application

- Pressing the **submit** button lodges your application. Please ensure you **review** your application before submitting, as you cannot change your application after lodgement.
- When the application has been successfully submitted a **return email receipt will be sent**.
- An application is not considered to have been received by the department until the submitter has received an **email receipt**.

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- If you do not receive an **email receipt** within two business days of submitting your application, please contact the department on the contact details below.
- The email receipt does not provide any assurance of funding.

Enquiries

For further enquiries on this application form please contact the Department of Employment, Small Business and Training either by email grants@desbt.qld.gov.au or telephone 1300 654 687.