GRANT APPLICATION FORM – TELEVISION TRANSITION

Important Information

This application form is for residents and eligible premises seeking reimbursement under the Television Transition Redeemable Grant Program.

- Applicants must read the Grant Guidelines prior to completing this form.
- Submission of this form does not guarantee funding approval.
- Applicants must pay all costs upfront and seek reimbursement through the acquittal process.

Part A – Applicant Details

Applicant Name: _____

Postal Address: _____

Property Address (if different): _____

Rate Assessment Number: _____

Phone Number: _____

Email Address: _____

Part B – Property and Applicant Type

Property Type (tick one):

- ☐ Residential dwelling
- ☐ Motel / Hotel
- ☐ Aged care / Community facility
- ☐ Other (please specify): _____

Township:

- ☐ Quilpie
- ☐ Eromanga

Does the property currently rely on Council-provided television re-transmission services?
☐ Yes ☐ No

Part C – Proposed Works

Brief description of works to be undertaken (e.g. satellite dish installation, VAST set-top box, purchasing of streaming enabling device):

Part D – Contractor and Supplier Details

Preferred Contractor / Supplier Name:
Business Location:
☐ Quilpie Shire ☐ Outside Quilpie Shire
Contact Details:
Has a local supplier or contractor been approached?
☐ Yes ☐ No
If **No**, please briefly explain why local supply was not feasible (attach evidence where available):

Part E – Estimated Costs

Item	Estimated Cost (incl. GST)
Equipment	$
Installation	$
Other (specify)	$
Total Estimated Cost	$

(Attach quotations where available)

Part F – Declarations

I declare that:

- The information provided in this application is true and correct
- I have read and understood the Grant Guidelines
- I understand that reimbursement is subject to eligibility, funding availability, and successful acquittal
- I acknowledge that Quilpie Shire Council is not responsible for contractor workmanship or disputes

Applicant Signature: _____

Date: ____ / ____ / _____

Part G – Council Use Only

Application Received Date: _____

Eligibility Confirmed: ☐ Yes ☐ No

Approved / Not Approved: _____

Approved Amount (if applicable): $

Officer Name: _____

Officer Signature: _____

Submission Details

Completed application forms may be submitted via:

- Email: admin@quilpie.qld.gov.au
- In person or by post to:

Quilpie Shire Council
Attn: Corey Richards
Deputy Director Community & Business Development
50 Brolga Street,
Quilpie, QLD, 4480

This form must be accompanied by an acquittal form and supporting documentation for reimbursement.