

The Honda Foundation Office Use Only
Date Received:
Date Acknowledgement Sent:
Application Number:

Note: All fields must be complete. Typed applications are preferred except for where a signature is required.

Applicant & Contact Details

Organisation Name:

Organisation Postal Addres	ss:
City / State / Postcode:	
Australian Business Numbe	er:
[All applicants must have Deduction	ble Gift Recipient (DGR) status. Ensure a copy attached in the application]
Organisation Website:	
Categorise your organisation	on:
Example: Aged care, Disabled, Dis	advantaged, Health, Science, Technology
Provide a brief description	of your organisation [max. 50 words]:
Name of Applicant:	
Position:	
Phone Numbers [Landline 8	& Mobile]:
Email Address:	
Name of contact person - if	not the applicant:
Position:	
Phone Numbers [Landline 8	& Mobile]:
Email Address:	
- " - · · ·	
Funding Details	5
Funding Request \$	(excluding GST).
All grants for tangible items i.e. ed	quipment must have a supplier quote attached. Note GST will not be funded.
Funding Project Title:	
Project Summary - Describe	e the purpose of the funding [max. 200 words]:
Example: Who will benefit from the funding?	ne funding? What will be purchased with the funds? Is this grant for full funding or partial
Describe the planned outco	omes of the funding [max. 150 words]:

Example: The funds will enable the organisation to service X no. of clients for X period of time providing X benefits



Honda Centre Authorisation – Must be completed

To be completed by the $\underline{\textit{Dealer Principal}}$ at your local Authorised Motor Vehicle Honda Centre – refer to website for listing.

Honda Centre Name:

Honda Centre Code:
Dealer Principal Name:
Dealer Principal Email Address:
Dealer Principal Signature:
Date:
Dealer Principal Comments [max. 50 words]:
Banking Details
Should your application be successful, the funds will be electronically transferred into a nominated bank account. Please provide your organisations banking details:
Bank/Institution Name:
Account Name:
BSB Number:
Account Number:



Applicant Authorisation

In signing this agreement, I agree to:

- Submit the requested acquittal form if this application is successful
- If the application is successful The Honda Foundation may publish information contained in this application

Application Submission

Thank you for completing this application form.

If your local authorised Dealer Principal has endorsed the application, it is the <u>responsibility of the applicant</u> to submit the application by the nominated deadline via email to:

honda.foundation@honda.com.au

Please ensure that you have met the criteria on Checklist A and Checklist B on the following page.



Checklist A

Taxation

Is the applicant endorsed by the Commissioner of Taxation as a Deductible Gift Recipient (DGR) under Subdivision 30-BA, being of type complying with Items, 1,2 or 4 in Section 30-15 of the Income tax Assessment Act 1997?

Is a copy of your "Endorsement as a deductible gift recipient", issued by the Australian Taxation Office, enclosed with your application for funding?

Will the applicant retain their DGR status during the funding grant period?

Note: Only proceed with the application if the answer is 'yes' to all of the above questions

Is the applicant?

A deserving charity or approved body who focus their activities on the disadvantaged, disabled or those suffering long-term, life-threatening illness?

An approved humanitarian body?

An approved body that provides ad-hoc relief to victims of natural disasters?

An approved body that promotes inventions and the development of new technology?

Note: Only proceed with the application if the answer is 'yes' to at least one of the above questions

Checklist B

Applicant has completed the following sections:

- Applicant & Contact Details
- Funding Details
- Banking Details
- Applicant Authorisation
- Applicant Submission following Dealership Authorisation

A Honda Authorised Motor Vehicle Dealer has completed the following section:

Dealer Authorisation