

HIS 26.27 Application Form

Form Preview

Eligibility

* indicates a required field

Applicants: please note

Before completing this application form, you should have read the program guidelines:
www.mountbarker.sa.gov.au/build/heritage/heritageincentivescheme

The HIS is available to owners of a Local Heritage Place or of a Representative Building within a Historic Conservation Area. The HIS includes:

- The waiving of development application fees for conservation works.
- Free professional heritage advice from Council's Heritage Adviser. Advice is available for a range of projects such as: restoration of stonework, verandahs, roofs and fencing, general information on suitable materials, colours and construction techniques.
- A grants scheme involving a subsidy of up to 50% (up to a maximum of \$3,000) of the total cost of conservation works to assist owners in conserving heritage listed properties.

If you have any questions in regards to these eligibility criteria, please contact

Alyssa Hill, Community Grants Officer via phone 8393 6426 or email

ahill@mountbarker.sa.gov.au

Confirmation of Eligibility

I confirm that the applicant is an owner of a Local Heritage Places and/or of Representative Items and other historic buildings within a Historic Conservation Area.

To check the historic status of the building, visit: maps.sa.gov.au/heritagesearch

Please select below: *

☐ Yes

☐ No

Contact Details

* indicates a required field

Privacy Notice

We pledge to respect and uphold your rights to privacy protection under the [Australian Privacy Principles](#) (APPs) as established under the *Privacy Act 1988* and amended by the *Privacy Amendment (Enhancing Privacy Protection) Act 2012*. To view our privacy statement, go to <https://www.mountbarker.sa.gov.au/legal>

Applicant Details

Applicant *

HIS 26.27 Application Form

Form Preview

☐ Individual ☐ Organisation

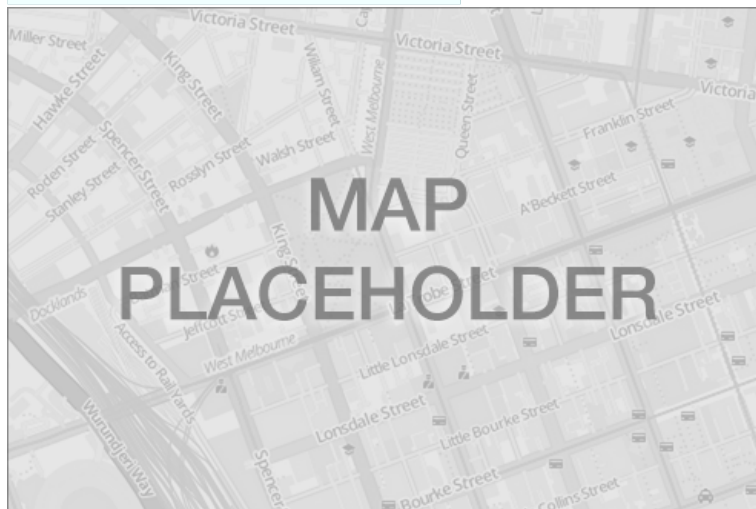
Organisation Name

Title First Name Last Name

For organisations: please use the organisation's full name.

Applicant address

Address



Applicant mobile number *

Must be an Australian phone number.

Applicant home number

Applicant work number

Applicant email address *

Must be an email address.

Do you have a contact person for this application that is different to the applicant above? This may be an Architect, Builder, Planner *

☐ Yes

☐ No

HIS 26.27 Application Form

Form Preview

Contact Person Details

i.e. Architect / Builder / Planner

Contact person name *

Title

First Name

Last Name

--	--	--

This is the person we will correspond with about this grant.

Contact person's role *

--

e.g., Architect, Builder, Planner

Contact person's mobile number *

--

Must be an Australian phone number.

Contact person's work number

--

Contact person's email address *

--

This is the address we will use to correspond with you about this grant.

ABN Details

* indicates a required field

Does the applicant have an ABN? *

☐ Yes

☐ No

I hereby certify that any supply made to you under this application is made in my capacity as an individual and is made in the course of an activity that is a private recreational pursuit or hobby, or wholly of a private or domestic nature.

☐ Yes

☐ No

Applicant 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	

HIS 26.27 Application Form

Form Preview

ABN Status
Entity Type
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type
ACNC Registration
Tax Concessions
Main Business Location

[More information](#)

Is the applicant registered for GST? *

☐ Yes ☐ No

Is the proposed conservation work for a non-commercial building (i.e. your own residence)? *

☐ Yes ☐ No

As you are registered for GST but the conservation work will occur on a non-commercial building (i.e. your own residence), this Heritage Incentive Scheme payments should be treated as GST free.

Conservation Works

* indicates a required field

NOTE: Work undertaken contrary to development approval or documentation work submitted for this application may result in the grant allocation(s) being withdrawn by Council.

Please summarise the proposed conservation work

Please upload photos and plans of the proposed conservation work *

Attach a file:

Cost of conservation works (including GST) *

\$

Must be a dollar amount.

HIS 26.27 Application Form

Form Preview

Cost of conservation works (excluding GST) *

\$

Must be a dollar amount.

Please upload 2 competitive quotes *

Attach a file:

Who is the preferred quote supplied by? *

Estimated starting date of project

Estimated completion date of project

If unknown, provide your best guess or leave blank If unknown, provide your best guess or leave blank

Has a development application been lodged? *

☐ Yes

☐ No

Development Application (DA) Number (if known)

Applicant Certification

* indicates a required field

The applicant acknowledges that the application and/or all supporting documentation may be made available for public scrutiny and discussion at a Council meeting.

I agree *

☐ Yes

☐ No

Applicants registered for GST

Where the applicant is registered for GST and any supply made by the applicant under this application is not made in the course of an activity that is a private recreational pursuit or hobby, or wholly of a private or domestic nature, the applicant and Mount Barker District Council agree that:

- The Mount Barker District Council may issue recipient created tax invoices for any supply provided to it by the applicant in respect to this application;
- The applicant will not issue tax invoices in respect of any supply provided to the Council by the applicant in respect to this application;
- The applicant acknowledges that it is registered for the goods and services tax at the time of entering into this agreement, and will notify the Mount Barker District Council if it ceases to be registered; and

HIS 26.27 Application Form

Form Preview

- The Mount Barker District Council acknowledges that it is registered for the goods and services tax at the time of entering into this agreement, and will notify the applicant if it ceases to be registered.

I agree *

☐ Yes

☐ No

Certification and Feedback

* indicates a required field

Certification

This section must be completed by an appropriately authorised person.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant is approved for this grant, they will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes

☐ No

Name of authorised person *

Title

First Name

Last Name

Contact phone number *

Must be an Australian phone number.

Contact email *

Must be an email address.

Date *

Must be a date

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

☐ Very easy

☐ Easy

☐ Neutral

☐ Difficult

☐ Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.

