



Anticipated Outcomes/Benefits:

(attach additional pages if required)

ATTACH QUOTES AND THEIR BANK DETAILS FOR DIRECT PAYMENT

Project Cost: Inc. GST

Labour:		\$
Materials:		\$
Equipment:		\$
Other:		\$
	Total of Project Costs	\$
Other Grants: Applied or Applying for (if any):	\$	
Your Contributions:	Hours (or)	\$
Volunteer Contributions:	Hours (or)	\$
	Total	\$
Total Project Cost:		\$
Grant Payment – DDWF Community Fund Committee Use		\$
I Certify that the information concerning this application is true and correct, and in-line with the application guidelines.		

Signed: _____ Full Name: _____

Date: _____

For office use	Cheque No.
Cheque made out to	\$
Cheques made out to	\$

Date Received: _____ Date Approved: _____

Committee Member: _____

Please retain a copy for your records and send the original application form to:
Tilt Renewables – Dundonnell Wind Farm Community and Education Fund
Email: DDWFcommunityfund@tiltrenewables.com or post: GPO Box 16080, Collins Street West, Melbourne 8007
PH: 1800 WE TILT (938 458)