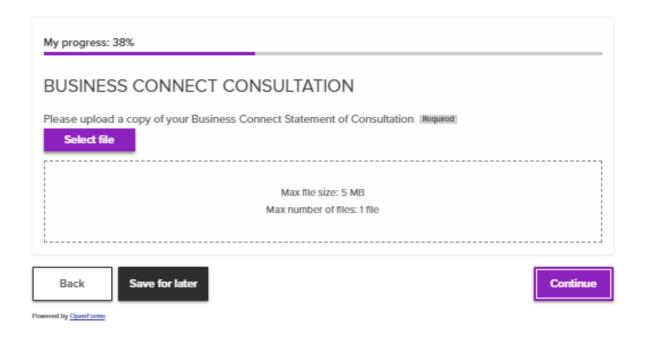
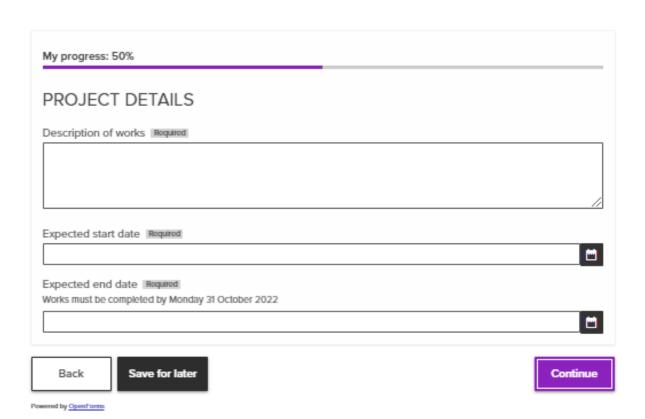
## STREET APPEAL GRANT APPLICATION PREVIEW FORM

My progress: 13%	
BUSINESS DETAILS	
Business name Required	٦
ABN Required	_
Email address Roqured	_
Business hours contact number   Required	_
Business address - line 1 Required	_
Business address - line 2	_
Suburb Required	
Suburb imagained	
Postcode   Required	7
I confirm that the project will take place at this business address   Required	_
Back Save for later Continue	

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My progress: 25%
APPLICANT DETAILS
Given name Required
Surname Required
Business hours contact number Required
Residential address - line 1 Required
Residential address - line 2
Suburb Required
Postcode Required
Please upload a copy of your Public Liability Insurance Certificate of Currency Required  Select file
Max file size: 5 MB
Max number of files: 1 file
Are you the Required
Owner of the premise
Tenant of the premise
Back Save for later Continue





My progress: 63%
CURRENT SHOPFRONT
Describe your current business shopfront (including the current look of the appearance, noting any damages or defects) Required
Why would your business benefit from the grant improvements? Required
Please attach a photo of the current shopfront facade Required  Select file
Max file size: 5 MB
Max number of files: 5 files
Back Save for later Continue

My progress: 75%	
PROJECT FUNDS	
Expenditure item 1 Required	_
	╛
Amount 1 Required	$\neg$
Would you like to add another expenditure item? Required	
○ Yes ○ No	
Total Project Cost:	
\$0.00	
Please upload an electronic copy of a quote from a tradesperson. The quote must include a valid ABN, and match the project costs outlined above. Required  Select file	
Max file size: 5 MB	
Max number of files: 5 files	
<u> </u>	
Back Save for later Continu	e
My progress: 88%	
DECLARATION	
By submitting this form, I agree that:	
Thave read and understood Council's Street Appeal Grant Policy, and agree to the guidelines set by Council. Required.	
I will be required to submit a grant acquittal form upon completion of the project. Required  The improvements to my business shopfront facade will abide by the Campbelliown (Sustainable City) Development Control Plan 2015. Required	
I understand that Council may request further information with regard to my application.   Required	
Lagree that the information I have provided is true and correct.   Required	
Please complete the following:	
Firm not a robot reductions of the control of the c	
Back Save for later Submit applicate	ion
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