

Kondinin Energy_Early Winds Fund_Application Form 2026

Form Preview

Organisation Details

* indicates a required field

Applicant *

Organisation Name

Organisation Name

Street Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required. Country must be Australia

Postal Address *

Address

Project contact person *

Title First Name Last Name

Position *

Phone Number *

Must be an Australian phone number.

Mobile number

Must be an Australian phone number.

Email *

Must be an email address.

ABN *

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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	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

If unincorporated, Sponsor Organisation name

Organisation Name

Sponsor Organisation Address

Address

only required if unincorporated

Sponsor Contact details

Title First Name Last Name

only required if unincorporated

Sponsor Phone Number

Must be an Australian phone number.

Only required if unincorporated

Are you registered for GST *

Yes

No

Bank Account *

Account Name

BSB Number Account Number

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Must be a valid Australian bank account format.

About your Organisation

Provide a brief overview of your organisation, including the main purpose of your organisation *

List board/committee members and senior staff of your organisation. *

Include Name and Position

Please list any government officials/public officials who are involved in your organisation. Please see Guidelines for more information on government officials.

Name and government position

Project Details

* indicates a required field

Project information

Project Name *

Focus Area *

Regional Liveability

Start Date

Must be a date.

End Date

Must be a date.

Location of Project *

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Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.
Only locations within 10kms of Kondinin Wind Farm Western Australia are eligible.

Requested project funding from Kondinin Wind Farm *

\$

Must be a dollar amount.

Must be between \$5,000 AUD to \$20,000 AUD. What is the total financial support you are requesting in this application?

Total Project Cost *

\$

Must be a dollar amount.

What is the total budgeted cost (dollars) of your project?

Project description: Briefly describe your project and what the funding will be used for *

How will your project benefit the community *

How was the need or demand for this project identified with the local community

If your application is successful, how do you intend to acknowledge Kondinin Wind Farm project support?

e.g. Newsletter, Media Release, Social Media etc.

Project Budget (Expenditure)

Please outline your project expenses in the expenditure table below, including whether the amounts and total are GST inclusive or exclusive. Prohibited items should not be requested. Please refer to guidelines.

For expense items over \$2000 AUD, quotes will need to be provided in the file upload area below the tables.

Budget

Expenditure	\$

Budget Totals

Total Expenditure Amount

This number/amount is calculated.

Please upload any quotes for items over \$2000 AUD here

Attach a file:

Applicant Declaration

* indicates a required field

I declare that all information provided in this application is true and correct, and accept information provided in this application will be stored by Shell, Foresight Group and the Kondinin Wind Farm project.

Yes

I understand this application does not create a legal or binding commitment, arrangement or understanding between Shell, Foresight Group or the Kondinin Wind Farm Project and the applicant organisation. Any such commitment, arrangement or understanding will be the subject of further negotiation and documentation. *

Yes

I understand and accept organisations successful in their application for funding may be required to participate in a range of promotional and project profiling activities. *

Yes

I understand that submitting this application I am submitting on my organisations behalf and I have sought that authorisation. *

Yes

Authorised organisation representative's Details

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Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Attach supporting documentation

Supporting documentation

Attach a file:

Attached any further supporting documentation you would like to include eg. a whole project budget, certificate of incorporation or other relevant information here.

Declaration

I declare that the information in this application form is true and correct. I also declare that I have appropriate permission to submit on the organisations behalf.

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Complete your details to submit on behalf of your organisation