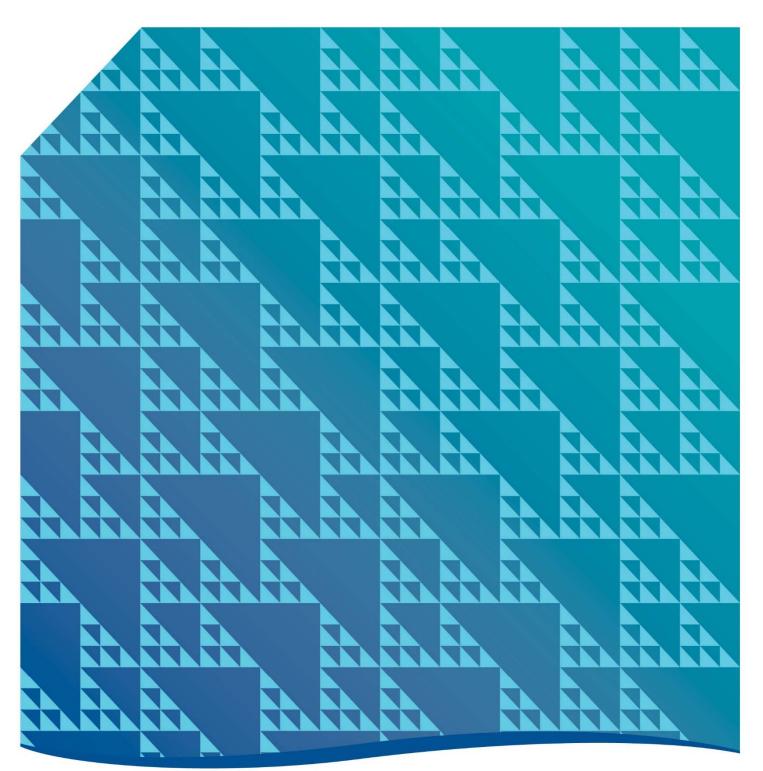
Hobart to Strahan Trial Air Passenger Service Application form





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Hobart to Strahan Trial Air Service

Please read the Program Guidelines that are available from the Department of State Growth (the Department) website https://www.stategrowth.tas.gov.au/policies_and_strategies. Queries about the Program can be directed to the Program's contact officer by email at cis@stategrowth.tas.gov.au or by phone on (03) 6166 3485.

I. Applicant Details

Contact Name:

Contact Position:

Contact Email:

Contact Phone: Business Hours

Mobile Phone:

Document title

2. Eligibility Details

Legal Name:

Trading Name:		
ABN/ACN:		
Street Address:		
Postal Address:		
Email:		
Phone: Business Hours	Mobile Phone:	
Total Cost of Proposed Project:		
Value of Funding Applied For:		

3. Business Details

3.1 Business structure

Business structure:

- () Sole trader () Partnership () Company
- () Trust provide a copy of the trust deed
- () Other, please specify

4. Merit Criteria

ATTACH COPY OF PROPOSAL ADDRESSING THE MERIT CRITIERIA.

Relevant details of the Merit Criteria are contained in the Program Guidelines.

5. Declaration

For and on behalf of the applicant detailed on page one of this application, I, the undersigned, acknowledge and warrant (as the case may be) that:

- 1. I have authority to provide the information contained in this application and to execute this application for and on behalf of the applicant.
- 2. The Department can rely upon the information and representations contained in this application (including these acknowledgements).
- 3. The applicant has read and understands the terms and conditions relating to this application outlined within the guidelines, and agrees to be bound by the said terms and conditions upon the application being approved.
- 4. I have read and understood the eligibility criteria for the program and declare that to the best of my information, knowledge and belief that the applicant is eligible under the program criteria and that the information provided in this application is true and correct.
- 5. I nor the company I represent are not subject to any current legal disability, including administration, receivership, bankruptcy or liquidation;
- 6. The Department may undertake all necessary credit checks and organisational searches on the applicant as is determined necessary, and is hereby authorised to do so.
- 7. The application is made at the applicant's own cost and risk, the selection of the applicant for program funds is at the absolute discretion of the Department and this application remains the property of the Department.
- 8. The applicant will be responsible for notifying the Department in writing of any changes in the above particulars. Until receipt of such notification, the Department shall process all payments in accordance with the above particulars.
- 9. The applicant agrees to indemnify the Crown in Right of Tasmania against all present and future legal liability, claims or proceedings for financial loss arising from, or attributable to the provision and use of the information contained in this application.

I, the undersigned agree to the terms and conditions of this grant program.

Name of person signing:

Position:				
Signature:				
	Date:	/	/	
Witness name:				
Witness signature:				

6. Checklist

To ensure the assessment of the application is not delayed, please use the checklist below to confirm that all requested information has been attached to this application.

Please ensure your proposal addressing the Merit Criteria is attached......()

If you are a Trust, a copy of the relevant pages of your Trust Deed......()

Applications close on Thursday, 18 October 2018 at 10:00am and must be submitted via email or post.

Email: cis@stategrowth.tas.gov.au

Post: Strategy, Policy and Coordination Branch - Infrastructure Policy

Department of State Growth

GPO Box 536

Hobart TAS 7001



Department of State Growth

Street Address

- Government
- 03 6166 3485 Phone:
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- Web: https://www.stategrowth.tas.gov.au/business/sectors/culture_and_tourism_industry _sector