

GRANT ACCEPTANCE FORM

SoY reference	
Grantee organisation	
Project	
Grant Offer Date	

Please read carefully the terms and conditions set out in our grant offer letter, detailed above: in accepting these you will be entering into a legal contract with the Shire of York.

If you are happy to accept these terms and conditions, please arrange for this form to be completed and returned within **one month** of our grant offer date.

How to complete this form

<u>The grant acceptance section</u> should be signed by **two representatives** of your organisation who have the authority to enter into legal contracts. It is for you to determine the appropriate representatives, but these are likely to be members of your executive committee. At least one of these signatories should in addition be an authorised signatory of your organisation's bank account.

<u>The bank details section</u> should be completed by **two signatories** of your organisation's bank account.

Please note that we reserve the right to make checks on individuals, such as credit checks, for the purposes of fraud prevention.

Next step

Once the Grant Acceptance form has been completed and signed, please return with your Tax Invoice for the grant amount approved to the Shire office at 1 Joaquina Street, York WA 6302 by hand delivery or post or by return email to

An acquittal form is required no later than 90 days following the completion of your approved project or activity. An acquittal report was forwarded to you with your letter of approval.

Grant Acceptance

In signing this form, you are accepting the terms and conditions of the Shire of York: Community Funding; Grants & Sponsorship Policy & its associated guidelines, on behalf of your organisation.

Signature	
Date	
Name	
Position in organisation	
Home address	

Signature	
Date	
Name	
Position in organisation	
Home address	

Bank account held by your organisation

Name of Bank or Building Society			
Bank/Building Society Branch address			
Date account was opened			
Name of organisation holding account			
Does this match the name on your gove	erning document?	Yes	No *

* If not, please provide an explanation here:	
Bank or building society account	
number	

Authorised signatories for this account

1.

Signature	
Date	
Name	
Position in organisation	
Home address including postcode	

2.

Signature	
Date	
Name	
Position in organisation	
Home address including postcode	

Thank you for completing this form. Please see first page for the next step.