# Advanced Manufacturing Growth Fund Sample application form

This document informs you of the questions we will ask you in the online form when you apply for the Advanced Manufacturing Growth Fund program. It will help you prepare your responses and the mandatory attachments you will need before you apply online.

**Do not use this document as your application form. You can only submit an application when the online form is available**.

Getting help

If you require assistance preparing your application form please contact us on 13 28 46 or at [business.gov.au](http://www.business.gov.au/contact-us/Pages/default.aspx). Our website and staff can help you with forms (once available), finding business information and services and allow you to provide feedback, comments or suggestions.

You should also read and understand the [program guidelines](https://www.business.gov.au/rjip) and sample [grant agreements](http://www.business.gov.au/rjip) before completing an application. View these documents at business.gov.au.

Submitting your application

Applications must be submitted using the online form during the funding round.

## Eligibility

### Eligible entities and activities

This section will help you determine whether you are an entity eligible for the program.

You are required to answer all questions in this section.

|  |  |  |
| --- | --- | --- |
| Is your organisation incorporated in Australia? | yes | no |
| Is your organisation non-income tax exempt?  A "Non Tax Exempt Organisation" means an entity that is not exempt from income tax under Division 50 of the Income Tax Assessment Act 1997 (Cth) or under Division 1AB of Part III of the Income Tax Assessment Act 1936 (Cth). | yes | no |
| Do trading activities   * form a sufficiently significant proportion of its overall activities, or * are a substantial and not merely peripheral activity of the corporation | yes | no |
| Does your business have an Australian Business Number? | yes | no |
| Is your business registered for the Goods and Services Tax (GST)? \* | yes | no |
| Is your organisation a small or medium enterprise (SME) with 199 full time equivalent employees or less? | yes | no |
| Can you provide evidence from your board (or chief executive officer or equivalent if there is no board) that the project is supported, and that you can complete the project and meet the costs of the project not covered by grant funding? | yes | no |
| Can you provide an Accountant Declaration that confirms you can fund your share of the project costs?  You must use the Accountant Declaration form in Appendix D of the program guidelines and available on business.gov.au. | yes | no |
| Does your project have at least $1.5 million in eligible expenditure?  For guidance on eligible and ineligible expenditure see Appendix B and C of the program guidelines. | yes | no |
| Will the project occur in Victoria or South Australia (or both)?  If your project involves relocating manufacturing operations to South Australia or Victoria (either from another Australian state or territory or from another country), only activities directly related to new or additional capability are eligible. No other activities associated with relocation are eligible. | yes | no |
| Does your project involve buying, constructing, installing or commissioning of manufacturing capital equipment? | yes | no |
| Will your project result in commercial production ready manufacturing?  Product development activities are not eligible. | yes | no |

If you have answered ‘**yes**’ to all of the questions above you are eligible to apply for this program.

|  |  |  |
| --- | --- | --- |
| Is your business a Commonwealth, State or Local Government Agency, Body or Government Business Enterprise? \* | yes | no |

If you answered ‘**no’** to the question above you are eligible to apply for this program.

For further information regarding eligibility requirement for this program refer to the Advanced Manufacturing Growth Fund program guidelines.

## Applicant information

### Joint applications

Joint applications are acceptable, provided you have a lead applicant who is the main driver of the project and is eligible to apply.

|  |  |  |  |
| --- | --- | --- | --- |
| Is this a joint application? |  | yes | no |

If you answered ‘**yes’** to this question the lead applicant must complete this form. If you are unsure whether your application should be a joint application contact us on 13 28 46 or at [business.gov.au](http://www.business.gov.au/contact-us/Pages/default.aspx)

### Type of applicant

In this section you must indicate what type of entity you operate under.

All entities must have an ABN

Select which type of entity your organisation is

|  |  |
| --- | --- |
|  | a company incorporated in Australia |
|  | incorporated trustee on behalf of a trust |
|  | other incorporated entity |

If you selected other eligible entity please specify.

|  |
| --- |
|  |

### Applicant details

If you are applying as a trustee on behalf of a trust leave this question blank and go to the next question.

|  |  |  |  |
| --- | --- | --- | --- |
| Australian Business Number (ABN) |  | | |
| Australian Company Number (ACN)  If applicable |  | | |
| Legal/ registered entity name |  | | |
| Business/ trading name  Your business may have registered one or more business names. If you operate under a business or trading name enter these names here. |  | | |
| GST registered? | | yes | no |

### Trustee and trust details

|  |  |  |  |
| --- | --- | --- | --- |
| Australian Company Number (ACN) of the trustee |  | | |
| Australian Business Number (ABN) of the trustee  (if different to trust, otherwise leave blank) |  | | |
| Legal/ registered entity name of the trustee |  | | |
| Australian Business Number (ABN) of the trust |  | | |
| Legal/ registered entity name of the trust |  | | |
| Business/ trading name  Your business may have registered one or more business names. If you operate under a business or trading name enter alternate names here. |  | | |
| Is the trust GST registered? | | yes | no |

You must provide a copy of the trust documents showing the relationship of the incorporated trustee to the trust.

### ANZSIC details

|  |  |
| --- | --- |
| What is the applicant’s main revenue earning activity under the Australian and New Zealand Standard Industrial Classification (ANZSIC)?  The ANZSIC codes and titles are available from the [Australian Bureau of Statistics (ABS) website](http://www.abs.gov.au/ausstats/abs@.nsf/0/20C5B5A4F46DF95BCA25711F00146D75?opendocument). Phone 13 28 46 if you require assistance. |  |

### Address details

Provide your **business street address** (Australian Head Office).

|  |  |
| --- | --- |
| Address |  |
| Suburb/ town |  |
| State/ territory |  |
| Postcode |  |

Provide your **business postal address**.

Same as your business street address, go to next section.

Different to your business street address, provide details below.

|  |  |
| --- | --- |
| Address |  |
| Suburb/ town |  |
| State/ territory |  |
| Postcode |  |
| Country | Australia |

### Website address

Provide your business’ website address.

|  |
| --- |
|  |

### Project site address

|  |  |  |
| --- | --- | --- |
| Will your project’s activities occur solely at the above listed head office address? | yes | no |

If you answered ‘**yes**’ go the next question. If you answered ‘**no**’ complete the following table.

Project site address must be a street address not postal.

Site address 1

|  |  |
| --- | --- |
| Address |  |
| Suburb/ town |  |
| State/ territory |  |
| Postcode |  |
| Country | Australia |

Site address 2

|  |  |
| --- | --- |
| Address |  |
| Suburb/ town |  |
| State/ territory |  |
| Postcode |  |
| Country | Australia |

Site address 3

|  |  |
| --- | --- |
| Address |  |
| Suburb/ town |  |
| State/ territory |  |
| Postcode |  |
| Country | Australia |

### Latest financial year figures

|  |  |  |
| --- | --- | --- |
| Has the applicant existed for a complete financial year? | yes | no |
| If you answered ‘**yes**’, enter the latest completed financial year, then complete the table below.  Example entry 2015-16 |  | |
| If you answered ‘**no**’, enter the number of months completed in financial year to date, then complete the table below. | months | |

We collect the following data from all applicants across all grant programs. We use this data to better understand your business and to help us develop better policies and programmes.

All amounts in the table below must show a whole dollar value e.g. $1 million should be presented as $1,000,000. The turnover value must be that of the incorporated entity that is making the grant application (the ‘applicant’), regardless of whether the entity belongs to a consolidated group for tax purposes.

**These fields are mandatory and entering $0 is acceptable if applicable.**

| Recent trading performance | Latest financial year figures |
| --- | --- |
| Sales revenue (turnover)  Total revenue from the sale of goods and services, as reported in the applicant’s Business Activity Statement (BAS). | $ |
| Export revenue  Total revenue from export sales, as reported in the applicant’s Business Activity Statement (BAS). | $ |
| R&D expenditure  Expenditure on Research and Development, i.e. creative work undertaken on a systematic basis in order to increase the stock of knowledge, including knowledge of man, culture and society, and the use of this stock of knowledge to devise new applications. | $ |
| Taxable income  Taxable income or loss as per the applicant’s business income company tax return form. | $ |
| Employees, including working proprietors and salaried directors (headcount)  No of individuals who are entitled to paid leave (sick and holiday), or generate income from managing the business. |  |
| Independent contractors (headcount)  No of individuals engaged by the business under a commercial contract (rather than an employment contract) to provide employee-like services on site. |  |

### Ultimate Holding Company

|  |  |  |
| --- | --- | --- |
| Does your company have an Ultimate Holding Company? | yes | no |

If you answered ‘**yes**’ complete the following table. If you answered ‘**no**’ go to next question.

|  |  |
| --- | --- |
| Ultimate Holding Company ABN (if applicable) |  |
| Legal/ registered entity name of Ultimate Holding Company |  |
| Country |  |

### Project partner organisation details

If in the first question of this section you answered ‘**yes**’ to the question relating to joint applications you are required to provide details of the joint project partner organisations in the following table.

For an explanation of entity types refer to the second question. You may be required to provide further financial details about your collaborative project partners if your application is successful.

| No | Australian Business Number | Australian Company Number | Organisation name | Entity type |
| --- | --- | --- | --- | --- |
| 1 |  |  |  |  |
| 2 |  |  |  |  |
| 3 |  |  |  |  |
| 4 |  |  |  |  |
| 5 |  |  |  |  |
| 6 |  |  |  |  |
| 7 |  |  |  |  |

You must attach a letter of support from each of the other organisations involved in the proposal.

Refer to section 8.2 of the program guidelines for what is required in the letter of support.

## Project details and funding

### Project title and description

If your application is successful, the details you provide below will be published on the departmental website. Published project details will include:

name of the applicant

title of the project

a description of the project and its intended outcomes

amount of funding awarded.

Provide a project title.

|  |
| --- |
|  |

25 word limit

Provide a brief project description for publication on our website.

Ensure your project description focuses on your project’s key activities and outcomes. Explain what it is you are going to do and how it will benefit your business. If the application is successful this project description will be used by the Australian Government in published material.

Example project description: Advanced Manufacturing Pty Ltd is an injection moulding company that manufactures plastic products and now intends to expand its business into the healthcare sector by manufacturing sterile plastic equipment for medical use.

|  |
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|  |

125 word limit

### Project plan

You must provide a plan of the project activities you will conduct including timetable for all significant activities.

You should include this as attachment when submitting your application.

### Project milestones and key activities.

You must complete your project within 30 months.

You must list and describe all major activities and outcomes for each stage of your project. Your grant payments will be tied to the achievement of milestones. Ensure that each milestone has specific and measureable outcomes and that you will be able to provide evidence of milestone achievement. You can group multiple related and unrelated outcomes within a single milestone.

Projects can have a maximum of nine milestones and payment points. The final project payment is made when you meet your final project reporting obligations. Projects which go for a period of less than 6 months can have a single milestone and a maximum of 2 milestones. The project start date is the date you commence project activities and should be the date you commence milestone 1.

You must not start any project activities until a grant agreement is executed.

Further guidance on completing the milestone table including eligible expenditure and eligible activities is in the program guidelines.

Enter amounts into the table below and provide detail on the activities occurring at each milestone.

The start date of milestone 1 is the expected project start date. The end date of your last milestone activity will be the project end date.

#### Milestone 1

Milestone title

|  |
| --- |
|  |

Milestone description

|  |
| --- |
|  |

Milestone start date Milestone end date

|  |  |
| --- | --- |
|  |  |

Estimated eligible milestone cost ($A) (ex GST)

|  |
| --- |
|  |
| Evidence to be provided |
|  |

#### Milestone 2

Milestone title

|  |
| --- |
|  |

Milestone description

|  |
| --- |
|  |

Milestone start date Milestone end date

|  |  |
| --- | --- |
|  |  |

Estimated eligible milestone cost ($A) (ex GST)

|  |
| --- |
|  |
| Evidence to be provided |
|  |

#### Milestone 3

Milestone title

|  |
| --- |
|  |

Milestone description

|  |
| --- |
|  |

Milestone start date Milestone end date

|  |  |
| --- | --- |
|  |  |

Estimated eligible milestone cost ($A) (ex GST)

|  |
| --- |
|  |
| Evidence to be provided |
|  |

### Project duration

The maximum project period is 30 months. You cannot start your project until you execute a grant agreement with the Commonwealth.

Your project start and end dates are a result of the dates you entered into your milestones. If they are not right you will need to modify your milestones.

|  |  |
| --- | --- |
| Project start date | Project end date |
|  |  |

### Project budget

Provide details on your total project costs over the life of the project including both eligible and ineligible costs.

You must also include a budget as an attachment when submitting your application.

Amounts must be GST exclusive. Projects must have a minimum of $1.5 million in eligible expenditure.

| Cost item | FY  2017-18 | FY  2018-29 | FY  2019-20 | FY  2020-21 | Total |
| --- | --- | --- | --- | --- | --- |
| Plant & equipment expenditure | $ | $ | $ | $ | $ |
| Commissioning costs | $ | $ | $ | $ | $ |
| Labour expenditure | $ | $ | $ | $ | $ |
| Contract expenditure | $ | $ | $ | $ | $ |
| Other eligible expenditure | $ | $ | $ | $ | $ |
| Total eligible costs | $ | $ | $ | $ | $ |
| Ineligible costs | $ | $ | $ | $ | $ |
| Total project costs | $ | $ | $ | $ | $ |

### Source of funding

Complete the table below to show how you will fund the eligible project costs.

Amounts must be GST exclusive. Note, the minimum grant amount under the program is $500,000 and the maximum grant amount is $2.5 million.

|  |  |
| --- | --- |
| a. Applicant's contribution ($A) | $ |
| b. Program grant amount ($A) | $ |
| c. Other government funding ($A) | $ |
| **Total eligible project costs ($A)** | ***(minimum $1.5 million)* $** |
| Grant percentage | *(Cannot exceed 33.33%)*      % |
| Total government grant percentage | *(Cannot exceed 33.33%)*      % |

The total government grant percentage including non-Commonwealth government funding cannot exceed 33.33%.

If you are receiving other government funding as indicated in the table above, provide details of the other government grant funding.

|  |  |
| --- | --- |
| Program name | Funding amount |
|  | $ |
|  | $ |
| Total | $ |

### Supportive documents

Provide the names of documents that you can provide to support your estimated project costs.

Examples of supporting documents are equipment supplier quotes, contractor quotes, etc. You do not need to submit these with this application form. However, if your application is successful you may be required to submit these documents before the grant agreement is finalised.

Expenditure for plant and equipment acquired through an operating lease can only be eligible expenditure where the following conditions are met:

the plant and equipment will be integrated into your manufacturing process

the plant and equipment cannot be transferred and the lease period is at least 4 years

You can find more details in the program guidelines.

|  |
| --- |
|  |

25 word limit

### Your contribution

You must also attach the following:

* Evidence of conditional support from your board (or if there is no board, support from the owner or chief executive officer) that the business can complete the project and meet the project costs not covered by grant funding.
* An Accountant Declaration to confirm your business can fund its share of the project costs. You must use the template provided on business.gov.au.

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## Merit criteria

To be competitive you will need to score highly against each merit criterion. Your application will be assessed against the indicators listed beneath each merit criterion. The merit criteria are weighted as indicated by the points. The amount of detail and supporting evidence you provide should be commensurate with the project size, complexity and grant amount requested.

### Merit criterion one (40 points)

The advanced manufacturing benefits for your business and the broader economy

Describe the business case for the project and provide information that demonstrates:

* the extent your project will use advanced manufacturing technologies, design and engineering excellence and innovative business processes
* how the project will improve the efficiency and competitiveness of your business
* the market opportunity for your project in Australia and/or internationally, and how you will take advantage of this opportunity
* the broader economic benefits from your project.

|  |
| --- |
|  |

625 word limit

### Merit criterion two (20 points)

Impact of the grant funding on your project

You should demonstrate this through identifying:

* the likelihood that your project would not proceed without the grant. Explain how the grant will positively impact your project, for instance in terms of size, scale and timing
* the total additional investment the grant will leverage and explain how this benefits your project. You are required to contribute at least two thirds of the total eligible project expenditure.

|  |
| --- |
|  |

625 word limit

### Merit Criterion three (40 points)

Your capacity, capability and resources to deliver the project

You should demonstrate this through identifying:

* your track record managing similar projects and access to personnel with the right skills and experience, including management and technical staff
* your access, or future access to, any infrastructure, capital equipment, technology, intellectual property and required regulatory or other approvals.

|  |
| --- |
|  |

625 word limit

## Supporting documents

You should note any supporting documentation that you attach to the application here. The following restrictions apply to attachments:

total size of all attachments and this application form should not exceed 20MB

file size of each attachment cannot exceed 2MB

only files with the following file type extension can be uploaded (.pdf, .rdtf, .doc, .docx, .xls, .xlsx)

### Attachment 01 – incorporated trustees

This is only for applicants where an incorporated trustee is applying on behalf of a trust, but is mandatory for those applicants:

| Part of application form | Type of attachments | Attached? |
| --- | --- | --- |
| Part B4 - trustee and trust details | A copy of the trust documents showing the relationship of the Incorporated trustee to the trust. | yes |

### Attachment 02 – evidence of support from the board, CEO or equivalent

This is a mandatory attachment.

| Part of application form | Type of attachments | | Attached? |
| --- | --- | --- | --- |
| Part C8 – Your contribution | | Evidence of support from the board, CEO or equivalent | yes |

### Attachment 03 – Accountant’s declaration

This is a mandatory attachment.

| Part of application form | Type of attachments | | Attached? |
| --- | --- | --- | --- |
| Part C8 – Your contribution | | Accountant’s declaration that confirms you can fund your share of the project costs. You must use the Accountant Declaration form in Appendix D of the program guidelines. | yes |

### Attachment 04 – letters of support from project partner organisations

This is only for joint applications, but is mandatory for those applications.

| Part of application form | Type of attachments | | Attached? |
| --- | --- | --- | --- |
| Part B11 – joint project partners | | For joint applications, letters of support from project partner organisations as outlined in Programme Guidelines 8.2. | yes |

### Attachment 05 – project plan

This is a mandatory attachment.

| Part of application form | Type of attachments | Attached? |
| --- | --- | --- |
| Part C2 – project plan | A plan of the project activities you will conduct including timetable and budget for all significant activities. | yes |

### Attachment 06 – budget

This is a mandatory attachment.

| Part of application form | Type of attachments | Attached? |
| --- | --- | --- |
| Part C5 – Project budget | A detailed project budget. | yes |

## Contact details

### Details of primary contact

Person authorised to act on behalf of the applicant.

(Note: You must provide at least one phone or mobile number. Other than title, all the remaining fields below are mandatory unless stated otherwise.)

Provide details of the primary contact.

|  |  |
| --- | --- |
| Title |  |
| Given name |  |
| Family name |  |
| Position title |  |
| Phone number |  |
| Mobile number |  |
| Email address |  |

Provide the postal address of the primary contact

|  |  |
| --- | --- |
| Address |  |
| Suburb/ town |  |
| State/ territory |  |
| Postcode |  |
| Country | Australia |

### Contact’s relationship to applicant

|  |  |  |
| --- | --- | --- |
| Is the applicant the primary contact’s employer? | yes | no |

If you answered ‘**yes**’ go the next question. If you answered ‘**no**’ complete the following table.

|  |  |
| --- | --- |
| What is the relationship of the primary contact to the applicant? |  |
| Name of primary contact’s employer |  |
| Australian Business Number (ABN) of primary contact’s employer |  |

Provide a contact for the applicant organisation

|  |  |
| --- | --- |
| Title |  |
| Given name |  |
| Family name |  |
| Position title |  |
| Phone number |  |
| Mobile number |  |
| Email address |  |

### How did the applicant hear about the programme?

|  |
| --- |
| If Other, please specify: |

## Applicant declaration

### Privacy and confidentiality provisions

I acknowledge that this is an Australian Government programme and that the department will use the information I provide in accordance with the following:

* [Australian Government Public Data Policy Statement](https://www.pmc.gov.au/sites/default/files/publications/aust_govt_public_data_policy_statement_1.pdf)[[1]](#footnote-2)
* [Commonwealth Grants Rules and Guidelines](https://www.finance.gov.au/sites/default/files/commonwealth-grants-rules-and-guidelines-July2014.pdf)[[2]](#footnote-3)
* Programme Guidelines
* applicable Australian laws.

Accordingly, I understand that the department may:

1. share information in this application with other government agencies for any purposes, including government administration, research or service delivery; and
2. publish non – sensitive information in this application in the public domain, including on the department’s website;

unless otherwise prohibited by law.

I confirm that I have read and understood the privacy, confidentiality and disclosure provisions outlined in the Programme Guidelines

|  |  |
| --- | --- |
|  | By checking this box I agree to all of the above declarations and confirm all of the above statements to be true |

### Applicant declaration

I declare that I have read and understood the Program Guidelines.

I declare that the proposed project outlined in this application and any associated expenditure has been endorsed by the applicant’s Board or person with authority to commit the applicant to this project.

I declare that the information contained in this application together with any statement provided is, to the best of my knowledge, true, accurate and complete. I also understand that giving of false or misleading information is a serious offence under the *Criminal Code 1995* (Cth)*.*

I declare that the applicant will comply with, and require that its subcontractors and independent contractors comply with, all applicable laws.

I understand that I may be requested to provide further clarification or documentation to verify the information supplied in this form and that the Department of Industry, Innovation and Science (the department) may, during the application process, consult with other government agencies, including state and territory government agencies, about the applicant’s claims and may also engage external technical or financial advisors to advise on information provided in the application.

I acknowledge that if the department is satisfied that any statement made in an application is incorrect, incomplete, false or misleading the department may, at its absolute discretion, take appropriate action. I note such action may include excluding an application from further consideration; withdrawing an offer of funding; using the information contained in the application for a fraud investigation that would be consistent with the Australian Government’s Investigations Standard and Fraud Control Guidelines and for management purposes and/or terminating any grant agreement between the Commonwealth and the recipient including recovering funds already paid.

I agree to participate in the periodic evaluation of the services undertaken by the department.

I declare that I am authorised to complete this form and to sign and submit this declaration on behalf of the applicant.

I approve of the information in this application being communicated to the department in electronic form.

|  |  |
| --- | --- |
|  | By checking this box I agree to all of the above declarations and confirm all of the above statements to be true |
|  | By including my name in this application it is deemed to be my signature for the purpose of this application |

### Signature

|  |  |
| --- | --- |
| Name of signatory |  |
| Email address of signatory |  |
| Date |  |
| Signature |  |

1. <https://www.pmc.gov.au/sites/default/files/publications/aust_govt_public_data_policy_statement_1.pdf> [↑](#footnote-ref-2)
2. <https://www.finance.gov.au/sites/default/files/commonwealth-grants-rules-and-guidelines-July2014.pdf> [↑](#footnote-ref-3)