

Business Enhancement Application Form 2026/2027

Form Preview

Horsham Rural City Council Business Enhancement Support Grants Application Form 2026-2027

Horsham Rural City Council's Business Enhancement Support Program was established to provide funding support to new and existing businesses in the municipality.

Applications for the 2026/2027 round close on **Thursday 31st July 2026**.

The maximum allocation per business is \$1000.

The application form must be completed online. If you require assistance to complete the on-line form, our Business Team can help, please contact them on 5382 9507 to make an appointment.

Privacy

Horsham Rural City Council (Council) is collecting the information in this form for the purposes of supporting your grant application. We will take all reasonable measures to protect your information from unauthorised access, loss or misuse. For further details of Council's privacy policy and privacy statement please click [here](#).

Eligibility

Does your business have an Australian Business Number (ABN) or is your business auspiced by an incorporated organisation with an ABN?

- Yes
- No

Does your business operate in Horsham Rural Council municipality?

- Yes
- No

Will you be able to complete the project by 31 December 2026?

- Yes
- No

Eligibility Criteria

Please note that additional to the conditions above, to be eligible for this funding you must also

- NOT be employed by the Horsham Rural City Council
- NOT have received funding for the same activity through any other Council Grant Programs in 2025/2026

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- NOT apply for any retrospective purchases or projects that commenced prior to the funding being awarded
- Use suppliers from the Horsham Rural City municipality, where possible

Not eligible to apply

Unfortunately, you answered **no** to one or more of the above eligibility requirements and are not eligible to apply for this grant round. If you would like further information please contact the Grants Team 53829777.

Contact Details

* indicates a required field

Business Details

Business Name *

Business Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Business Contact Person *

First Name

Last Name

Contact Person Phone Number *

Contact Person Email Address *

Auspice Organisation

If your business does not have an ABN you will require an auspice organisation to manage your grant.

Does you require an auspice organisation? *

- Yes
 No

If you choose yes, you must attached a signed Auspice Agreement (below). Click [here](#) to download the template

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Auspice Contact details

Auspice Organisation

Organisation Name

Must be a not-for-profit organisation

Auspice Primary Address

Address

Auspice Primary Phone Number

Must be an Australian phone number.
i.e. 0353829777

Auspice Primary Email

Must be an email address.

Auspice Contact Officer (name)

Attach signed Auspice Agreement

Attach a file:

Template available [here](#)

Australian Business Number (ABN) for your organisation or auspice (if applicable)

Applicant ABN

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

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Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type

[More information](#)

ACNC Registration

Tax Concessions

Main business location

Must be an ABN.

Attach Statement of Supplier form (if required)

If you or your auspice organisation do not have an ABN - you need to complete a Statement by Supplier form and submit it with your application. [Form available from the ATO](<https://www.ato.gov.au/forms/statement-by-a-supplier-not-quoting-an-abn/>) Failure to provide either an ABN or statement by supplier will result in Council being obliged to withhold 46.5% of the grant allocation (if successful) Please note that if you have nominated an auspice, this ABN must be for your auspice organisation

Attach a file:

Template available [here](#)

GST

If your organisation (or auspice) is registered for GST, your project funding will exclude GST

Please identify your GST status *

- Registered for GST
- Not registered for GST

Project Details

* indicates a required field

Project Name *

Project start date: *

Must be a date and between 1/7/2026 and 31/12/2026.

Project end date: *

Must be a date and between 1/7/2026 and 31/12/2026.

Grant amount requested: *

\$

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Total project cost: *

The amount requested in this application may be reduced. Please indicate the minimum amount of grant that would allow the project or part of the project to proceed.

Project description: *

How will you use the support funds? How will this increase/enhance your business?

Will the funding be used to support one of the following? *

- Innovation
 - Operational Improvements
 - Marketing Strategies
 - Business Growth
 - Accessibility and Inclusion Upgrades
- No more than 5 choices may be selected.

Do you plan to use local contractors? *

- Yes
- No

if you plan to use local contractors, please list them here.

Please attach a quote *

Attach a file:

Permits required

Does your project require a Planning, Building or Cultural Heritage Permit?

- No permits required
- Yes, ensure that the cost of obtaining any permits is included in your project

Declaration

* indicates a required field

Declaration and Privacy statement

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I certify that all details supplied in this application and in any attached documents are true and correct to the best of my knowledge, and that the application has been submitted with the full knowledge and agreement of the management of my business.

I have read the accompanying guidelines for applicants provided with this application form.

I agree that I will contact Horsham Rural City Council immediately if any information provided in this application changes or is incorrect.

I agree that the grant funds (if successful) will be used to deliver the project as detailed in this application.

If this application is successful, the business will provide an invoice for the grant amount to Horsham Rural City Council.

I am authorised to complete this application and have read and understood the declaration statement *

Yes

Authorised Person's Name *

Title

First Name

Last Name

Position held *

Date of declaration *