Energy Credit Scheme Application Form

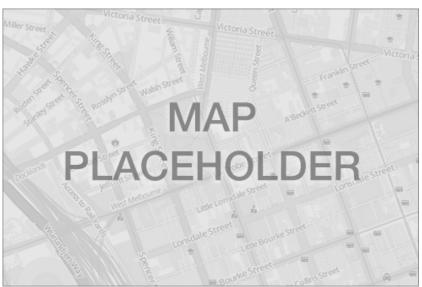
* indicates a required field

| Did you receive the 2023 Small Business of \$650? * | and Charities Energy Bill Relief payment |
|---|--|
| ○ Yes | ○ No |
| | |
| As you received the 2023 Small Business and be eligible for a fast track application. | Charities Energy Bill Relief payment you may |
| Your fast track application can be located und Select the application number starting with Ed | ler the 'My Submissions' tab in SmartyGrants. CFT to commence your fast track submission. |
| If you are directly billed by Synergy or Horizon program. | n Power you are not eligible under this |
| Eligibility | |
| 17 June 2024? * | ve ABN as a small business or charity on |
| ○ Yes | ○ No |
| 2. Is the small business or charity directYes | ly billed by Synergy or Horizon Power? * O No |
| | ume less than 50 megawatt hours (MWh) ed, be liable for less than \$15,000 in the |
| • Yes | ○ No |
| | |
| 4. Did the small business or charity incurYes | r electricity costs on 17 June 2024? * No |
| 5. Did the small business or charity occu tenant? * | py a commercial premise as owner or |
| ○ Yes | ○ No |
| 6. Did the small business or charity rece | ive power on-supplied via an embedded |
| <pre>network/submetering arrangement? * Yes</pre> | ○ No |

| 6.1. If the small business otherwise fall within the sclasses as specified in the Corporation) (Charges) By Corporation) (Charges) By | scope of one of Energy Opera y-laws 2006, or | the following el tors (Electricity | ectricity retail tariff Generation and Retail |
|---|---|---|--|
| O C1 or C2 O D1 | or D2 | ○ L1 or L2 | ○ R1 or R2 |
| 6.2. Please provide evide: Attach a file: | nce to support | the selected tar | iff * |
| 7. Is the business directly electricity provider? * Yes | billed by Alint | a Energy, Perth | Energy or any other |
| | | <u> </u> | |
| 7.1 Please provide eviden less than 50 MWh of elect than \$15,000 in the 12 mo | ricity or where | this is not meas | |
| You may be able to access your the previous 12 months electrici previous 12 months showing eleconsumption and/or costs downline. | ity usage and/or co ectricity consumpti | osts; or provide a Pro on and/or costs; or a | ofit and Loss statement for the an extract of your electricity |
| 8. Is the small business or A government entity A telecommunication pro An authorised deposit tak A major mining or resource An account for temporary An account where consurthis is not measured, be liable period prior to 17 June 2024 None of the above | vider king institution ces operator v electricity supp mption is reason | ly for the purposes | s of constructing premises. xceed 50MWh or where |
| 9. The small business or cYes | harity agrees | to the program's | Terms and Conditions * |
| Eligibility | | | |
| Based on your responses abo | ove, you are not | eligible for the Sm | all Business Energy Credit |

Please refer to the Terms and Conditions for eligibility and contact grants@smallbusiness.wa.gov.au for clarification if required.

| Business details | | | | |
|--|------------------|---------------|-------------|--------------------|
| 10. Business Name * Organisation Name | | | | |
| | | | | |
| 11. Describe what the bus | iness does * | | | |
| | | | | |
| 12. Business ABN * | | | | |
| The ABN provided will be use check that you have entered | | | nation. Cli | ck Lookup above to |
| Information from the Australian | Business Registe | r | | |
| ABN | | | | |
| Entity name | | | | |
| ABN status | | | | |
| Entity type | | | | |
| Goods & Services Tax (GST) | | | | |
| DGR Endorsed | | | | |
| ATO Charity Type | More inform | <u>nation</u> | | |
| ACNC Registration | | | | |
| Tax Concessions | | | | |
| Main business location | | | | |
| Must be an ABN. | | | | |
| 13. Business Address (not | a PO Box) * | | | |
| Address | | | | |
| | | | | |
| | | | | |
| | | | | |



| EATHER LONGON | table Boundary Street |
|---|---|
| | vince, Postcode, and Country are required. |
| 14. Does the business have a we○ Yes | ebsite? * O No |
| 14.1. Please provide the website | e URL * |
| Must be a URL. 15 Is the husiness on any socia | ıl media platforms, e.g. Facebook, Instagram, etc. |
| * O Yes | O No |
| 15.1. Please provide the busines | ss social media page URL * |
| Must be a URL. 15.2. Please provide any other k | business social media page URL |
| | |
| 16. Are you the owner or a tena ○ Owner | ont of the premise? * O Tenant |
| 17. If you are the owner, please Attach a file: | e upload an unredacted copy of your rates notice. * |
| | |

Small Business Energy Credit Scheme Application Form

| 17.1 Please upload a full and complete (unredacted) copy of the electricity bill provided by your landlord or managing agent, showing costs incurred on 17 Ju 2024. * | |
|--|----|
| Attach a file: | |
| | |
| | |
| 17. Did the small business or charity pay electricity as part of the lease agreement? * O Yes O No It may not be billed separately but be a portion of your rent payment. | |
| 17.1. Please upload an unredacted signed copy of your CURRENT LEASE. * Attach a file: | |
| | |
| 17.2. Please upload unredacted evidence of electricity costs incurred on 17 Jur 2024, such as an invoice for that period * Attach a file: | ıe |
| | |
| Entity issuing your electricity usage invoice | |
| 18. Who issues the business electricity usage invoice for the premises? * ○ Managing Agent | |
| 19. Name of entity issuing your electricity usage invoice * Organisation Name | |
| | |
| 20. Name of Managing agent / Landlord / Other * Title First Name Last Name | |
| | |
| 21. Position * | |
| | |
| 22. Managing agent / Landlord / Other - telephone number | |
| Must be an Australian phone number. | |
| 23. Managing agent / Landlord / Other - email address * | |
| Must be an email address | |
| | |

Business Primary Bank Account

| 24. Business Primary Ba Account Name | nk Account * | | |
|--|--|--|---|
| | | | |
| BSB Number Account N | Number | | |
| | | | |
| Must be a valid Australian banl | k account format. | | |
| | | | |
| bank statement showing June 2024, a BSB, an acc | business trans | actions for the | PDF copy of the business period 1 April 2024 to 17 name associated with the |
| application. * Attach a file: | | | |
| | | | |
| Bank statement showing trans | actions for the perio | od 1 April 2024 up t | to and including 17 June 2024 |
| Applicant Details | | | |
| OF Appliance * | | | |
| 25. Applicant * Title First Name | Last Name | | |
| Title Tillse Name | Edst Harrie | | |
| | | | |
| 26. Applicant's position i | in relation to the | e husiness: * | |
| Accountant | Bookkeepe | | ○ Tax agent |
| Business owner | Director | | Other: |
| | | | |
| | | | |
| 27. Phone number * | | | |
| | | | |
| Must be an Australian phone n | umber. | | |
| | | | |
| 28. Email address * | | | |
| | | | |
| Must be an email address. | | | |
| I agree, as the Applicant, or application, the Applicant a this agreement for and on b authority to make this agree | grees to be bound behalf of the Appli | I by the Terms ar cant, I represent | nd Conditions. If I am making and warrant that I have |
| • | | | nrovide false or misleading |

information, create a document or impersonate a person or business with the intent to deceive the grant provider in order to obtain a benefit, this may constitute a fraud offence

under the Criminal Code Act 1913 and be subject to criminal penalties.

○ I Agree

| Upload ABN | Lookup search if required |
|----------------|---------------------------|
| Attach a file: | |
| | |
| | |