

COMMUNITY GARDENS APPLICATION FORM

**NOTE Please use this form if you are applying to use council land for a community garden.
This is not a funding application form.**

An important first step is to read the City of Holdfast Bay Community Gardens Guidelines and the two-page leaflet, Information for Applicants available on www.holdfast.sa.gov.au
If you would prefer hard copies please contact Council on 8229 9999.

Please arrange a meeting to discuss your proposal with a Council officer before submitting your completed Application Form to:

Community Development Team

City of Holdfast Bay

PO Box 19

Brighton SA 5048

Email mail@holdfast.sa.gov.au

APPLICANT DETAILS

Community garden group name:

Contact person:

Email:

Phone:

Business hours:

After hours:

Mobile:

Fax:

Postal address:

Post code:

GROUP DETAILS

Is your group an incorporated association? YES NO

If YES, please attach a copy of your group's certificate of incorporation.

If NO, when will your group expect to receive its certificate of incorporation? (Date)

Alternatively, you may nominate a sponsor/auspice body i.e. an incorporated body who will accept the legal and financial responsibility for your group's garden project. If so, please ensure you attach a letter of agreement from your sponsor organisation confirming acceptance of responsibility for your garden project and ask them to complete the sponsor organisation information below.

IF APPLICANT IS NOT INCORPORATED

Name of sponsor organisation:

Postal Address:

Post code:

I,

(Sponsor contact's name)

(Position)

declare that the

(community garden group's name)

comes under the auspice of my organisation and is covered by my organisation's insurance policies as detailed in the Insurance section of this form and evidenced by the attached

Certificates of Currency

(Signature)

(Date)

PROPOSED SITE DETAILS

Address/location

Size/dimensions

Current use/s of the land

Existing structures/services (power)

Water access

Public toilets

Safety e.g. easily seen from nearby houses/shops, vegetation will not obstruct driver visibility

Accessibility e.g. public transport, bike tracks

Solar access

Soil type and quality

Community support

Other

GARDEN DETAILS

Purpose e.g. recreation/community building/food security/nutritional health/education

Will your community garden be open to the public (rather than members only with a key system)?

YES NO

Please describe:

Will there be restrictions about when your garden will operate? YES NO

Please describe:

ADDITIONAL INFORMATION

GARDEN PROPOSAL

Refer to the City of Holdfast Bay Community Gardens Guidelines and complete the ***Checklist – ideas to consider before starting a community garden.***

Attach a copy of your completed Checklist to this Application form.

INSURANCE

Applicants or their sponsors must maintain appropriate public liability insurance and appropriate Volunteers' personal accident and personal property insurance.

Please submit with your application form a CERTIFICATE OF CURRENCY for all insurance policies that includes:

- A minimum of \$20 million in public liability
- Personal accident cover for volunteers in accord with industry standards
- Relevant property insurance for volunteers in accord with industry standards
- A description of the insured, clearly describing the community gardening activities and any incidental and associated activities directly related to the activities of the community gardening group
- Details of the insurance company
- Policy expiry dates
- Policy number/s

DECLARATION

I apply to commence negotiations for a lease/licence agreement with the City of Holdfast Bay to use council land as described in this application. I have read and fully understand the City of Holdfast Bay Community Gardens Guidelines and declare that the information I have provided on this form and all of its attachments are true and correct.

I agree to provide any updates to this information in writing for council's records.

I understand that my application does not guarantee that I will be granted a lease/licence agreement with the City of Holdfast Bay. I have attached a copy of all required supporting documentation.

NAME:

SIGNATURE:

GUARDIAN SIGNATURE (if under 18 years of age)

GROUP:

DATE:

PRIVACY: The personal information supplied on this form is required in order to provide the service requested. It will be used by Council staff and stored in our record system for only as long as necessary. During this time it can be accessed and amended by you, and will only be given to third parties with your consent or as required by legislation.

SUPPORTING DOCUMENTS

Please ensure you have attached all supporting documentation:

INCORPORATION

Copy of your groups Certificate of Incorporation

OR

A letter from your sponsor/auspice organisation

INSURANCE

Copies of certificates of currency for all relevant insurance policies

GARDEN PROPOSAL

Copy of your completed *Checklist – ideas to consider before starting a community garden*

OTHER

Extra site details, copies of supporting information e.g. evidence of funding, letters of support from other community organisations