



Office Use Only

Organisation: _____

Request received: _____

Date Received: _____

Shire of Lake Grace
Facility Improvement Request

Due Date: Friday 16 April 2021

Contact Details

Organisation: _____

Contact Person: _____

Postal Address: _____

Telephone: _____

Mobile number: _____

Email: _____

Facility Details

Facility Name: _____

Facility address: _____

Details of work Requested:

Reason for request:

Amount that organisation / community group can contribute?

(cash or in-kind support)

Note: Late applications will not be accepted (posted applications must be received by the above date).
The completed Application and attachments are to be sent to:

By email: Signed and scanned Applications to: shire@lakegrace.wa.gov.au

By post: Shire of Lake Grace
Shire Community Grants
PO Box 50
LAKE GRACE WA 6353

In person: 1 Bishop Street
LAKE GRACE WA