Business and Contact In	formation	
* indicates a required field		
Business Information		
Legal entity name * Organisation Name		
Legal entity name (not trading name)		
Trading name *		
Can be the same as legal entity name	2	
Entity Type *		
Please select your entity type, if Othe	r is selected please specify Entity Type	e.
ABN *		
The ABN provided will be used to		Click Lookup above to
check that you have entered the A Information from the Australian Busin	<u> </u>	1
ABN	iess negistei	
Entity name		
ABN status		
Entity type		
Goods & Services Tax (GST)		
DGR Endorsed		
	More information	
ACNC Registration		
Tax Concessions		
Main business location		
Must be an ABN.		
Business primary address * Address		
Address Line 1, Suburb/Town, State/P	rovince, Postcode, and Country are re	quired.

Business postal address * Address
Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required
Business website
If your legal entity is a trust, please upload a copy of the trust deed.
Trust Deed * Attach a file:
Business Representative Information
Business representative name * Title First Name Last Name
Business representative position *
Business representative phone number (Preferred) *
Must be an Australian phone number.
Business representative phone number (Alternate)
Must be an Australian phone number.
Business representative email *
Must be an email address.
About your business
Business Primary Activity *
Length of operations in the Northern Territory *

Please provide length of operation in Months Primary Locations in NT for operations and service delivery * ☐ Darwin and surrounding areas ☐ Daly-Tiwi-West Arnhem □ Barkly ☐ East Arnhem □ Katherine ☐ Central Australia (outside of Alice Springs) ☐ Alice Springs Select all that apply Number of current Full Time Equivalent employees in the Northern Territory * Total number of employees in the Northern Territory * figure to include Casual, Part Time and Full-time employees Estimated number of new jobs * Must be a number. If nil, enter 0. Total number of employees in Australia * Please include NT Employees Please upload a copy of all business insurances held * Attach a file: types of insurances your business may hold: workers compensation, public and/ or product liability, professional indemnity, commercial building, motor vehicle etc **Project Information** * indicates a required field **Project Summary** Provide a brief description of the project including total capital funding to be sought and other participating capital providers. Project summary * Total cost of project *

Must be a dollar amount.

Total financing required for project *
\$ Must be a dollar amount.
Project information
Construction contractors *
Equipment suppliers *
Other relevant transaction parties *
Location *
Other funding sources (current & proposed) *
Summary of public benefit *
Proposed Indigenous outcomes *
Environmental, Social & Governance risks & mitigations *

Business Case

The business case should provide a clear understanding of the business, project, key project risks and mitigation strategies, the investment being sought and the use of the funds requested.

The business case must address each of the Assessment Criteria and how the requested Northern Territory Government support will achieve the objectives of the Fund.

Business case * Attach a file:
Other supporting documentation Attach a file:
Financial Model
The business case must be supported by a financial model that includes:
forecast revenue and expenditure over a minimum 5 year period
 expected financial returns for the project and to financiers details of all assumptions used in the development of the model and sources for each o the assumptions
 the balance sheet, cash flow and profit/loss statements for the entity undertaking the Project.
The financial model must clearly show that the requested Northern Territory Government support is required to enable the project to proceed.
The financial model should be provided in Microsoft Excel format. The model should be provided as a single workbook with all formulas complete and intact and with no links to external documents.
Financial model * Attach a file:
Must be an excel file
Financial Statements
The Application must provide full historical management or statutory financial statements and annual reports of the Applicant for the past three financial years.
The Application should also provide details of all parent companies of the Applicant and all other entities contributing finance to the project. Where finance is not being provided by a bank, financial statements and any recent annual reports of the financing entity should also be provided.
Financial Statements * Attach a file:
Please provide details of your existing borrowings including the loan amount, term, interest

Schedule of existing borrowings *

Attach a file:

rate and amount outstanding.

Australian Taxation Office
Please upload Australian Taxation (ATO) Integrated Client Account Statement.
ATO Integrated Client Account Statement * Attach a file:
Territory Infrastructure Loans
* indicates a required field
Loan Amount & Terms Sought
Term Sought *
Amount requested * \$
Minimum amount \$100,000 Maximum amount \$10,000,000. (Loans above \$5,000,000.00 are subject to WHS accredited contractor approval provision)
Repayment frequency *
Type of asset/s offered as security ☐ Commercial Property ☐ General Security Agreement Other
Select all that apply, if other is selected please provide description
Security Details
* indicates a required field
Assets offered as security must show a relation to the applicant, such as be in the name of the applicant, director or a shareholder.
Any third party assets offered as security must have written legal and financial advice given to the guarantor prior to this application.
Number of properties offered as security *

Details of property 1 offered as security Address * Address Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia Registered owner(s) of property * Estimated Market Value of your property * Must be a dollar amount. Is this property used as security on any other lending? Have you had this property valued by a certified valuer in the last 3 months for mortgage lending purposes? * ○ No An appraisal by a real estate agent is not accepted Please upload a copy of relevant building insurance * Attach a file: **Cerified Valuers name** Organisation Name Example: Herron Todd White, Integrated Valuations Services Valuation amount confirmed by Certified Valuer Must be a dollar amount. **Date of valuation** Must be a date.

Details of property 2 offered as security

An appraisal by a real estate agent is not accepted

Copy of valuation

Attach a file:

Address * Address
Addiess
Address Line 1, Suburb/Town, State/Province, and Postcode are required. Country must be Australia
Registered owner(s) of property *
Estimated Market Value of your property *
\$ Must be a dollar amount.
Is this property used as security on any other lending? ○ Yes ○ No
Property 2: Have you had this property valued by a certified valuer in the last 3 months for mortgage lending purposes? * ○ Yes
○ Yes ○ No An appraisal by a real estate agent is not accepted
Please upload a copy of relevant building insurance * Attach a file:
Certified Valuers name Organisation Name
Example: Herron Todd White, Integrated Valuations S
Valuation amount confirmed by Certified Valuer
\$ Must be a dollar amount.
Date of Valuation
Must be a date.
Copy of Valuation Attach a file:
An appraisal by a real estate agent is not accepted
Details of property 3 offered as security

Address

Address	
Registered owner(s) of property	*
Estimated Market Value of your p	aronerty*
\$	roperty
Must be a dollar amount.	
Is this property used as security	
○ Yes	O No
Property 3: Have you had this val mortgage lending purposes? *	lued by a certified valuer in the last 3 months for
Yes	○ No
An appraisal by a real estate agent is not	accepted
Please upload a copy of relevant	building insurance *
Attach a file:	
Certified Valuers name Organisation Name	
organisación name	
Example: Herron Todd White, Integrated	Valuations S
Valuation amount confirmed by C	ertified Valuer
\$	
Must be a dollar amount.	
Date of Valuation	
Must be a date.	
Copy of Valuation	
Attach a file:	
An appraisal by a real estate agent is not	accepted
Treation by a road obtain again is not	

Indigenous Engagement Strategy

* indicates a required field

All LJF-NAIF Borrowers are required to deliver Cultural Capability Training to all staff who are directly employed for more than 3 months.

LJF-NAIF Borrowers are expected to align the scale of their total commitment to supporting and developing the Territory Aboriginal workforce and Aboriginal businesses to the scale of their funding application. Successful applicants for LJF-NAIF financing are also expected to undertake a range of additional initiatives, depending on the scale of their funding application.

Level of approved LJF-NAIF financing:

\$500k or less

No additional commitment required

Up to \$3M

At least two additional initiatives

Up to \$5M

At least three additional initiatives

The additional initiatives LIF-NAIF Borrowers can elect to choose from include:

- 1.Develop or continue to implement a Reconciliation Action Plan.
- 2.Contract an Aboriginal business(es) to deliver part or all of the work.
- 3.Directly employ Aboriginal staff, trainees and/or apprentices for a minimum of 3 months.
- 4.Provide training support, scholarships or other investment in training/education opportunities to Aboriginal people, including staff employed by the LJF-NAIF Applicant or by contractors/subcontractors.
- 5.Other initiatives supported or recommended by Aboriginal communities in the areas the LJF-NAIF Applicant is working in, including initiatives supporting community development, cultural heritage management, and/or caring for country activities etc.

Have you completed an Indigenous engagement strategy * ○ Yes ○ Still in draft, to be provided later	
Please upload a copy of your Indigenous Attach a file:	s engagement strategy *

Names and contact details of advisors

* indicates a required field

Please provide all names and contact details of advisors.

Accountant

Name *
Organisation Name
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
Goods & Services Tax (GST)
DGR Endorsed
ATO Charity Type <u>More information</u>
ACNC Registration
Tax Concessions
Main business location
Must be an ABN.
Address
Address
Name *
Title First Name Last Name
Position *
Email *
Ellian ·
Must be an email address.
Phone Number *
Must be an Australian phone number.

Legal

Name	
Organisation Name	
ABN	
ADIN	
The ABN provided will be used to look up the	following information. Click Lookup above to
check that you have entered the ABN correc	tly.
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	ation
ACNC Registration	
Tax Concessions	
Main business location	
Must be an ABN.	
Address	
Address	
Name Title First Name Last Name	
Title First Name Last Name	
Position	
Email	
Must be an email address.	
Phone Number	
Must be an Australian phone number.	

Bank

Name Organisa	tion Name			
J				
ABN				
	provided will be us at you have entere		following information. ly.	Click Lookup above to
	on from the Australia	an Business Registe	ſ	
ABN				
Entity nar				
ABN statu				
Entity typ				
	Services Tax (GST)			
DGR Endo		More inform	ation	
ATO Char ACNC Reg		More inform	<u>acion</u>	
Tax Conce				
	ness location			
Must be a				
Address				
Address				
Name Title	First Name	Last Name		
Position				
i osicion				
Email				
Liliali				
Must be a	n email address.			
Phone N	lumber			
Must be a	n Australian phone r	iumber.		

Details of Intellectual Property

Please visit <u>IP Australia</u> for further information prior to completing this section.
Have you registered your IP? ○ Yes - provide registration number ○ No
Provide details of your IP
IP Registration Number
Declaration
* indicates a required field
Unattested Declaration under the Oaths, Affidavits and Declarations
Act
I (insert full name) *

solemnly and sincerely declare

- I have read and understood and agree to comply with the <u>Policy Framework</u> of the **NAIF** <u>Local Jobs Fund</u> (LJF)
- *** CORRECT HYPERLINKS TO BE ADVISED LATER***
- We have, and will maintain in force, all required permits, licences, insurances relevant to the conduct of the Contract(s);
- I understand some business/ organisation and contact information that we give to the Department as part of this application may be listed publicly and I acknowledge the disclosure in the Policy Framework regarding how the information I provide will be stored and used;
- We are not insolvent and I have no reason to believe it will become insolvent during the course of this Program;
- We are not currently being investigated by any law enforcement agency for fraud, NT Worksafe or Licensing NT non-compliance;
- I understand and consent to the Department conducting any due diligence in relation to my business as it sees fit, including but not limited to conducting spot audits and site inspections:
- I will advise the Department immediately if any details relating to my business/ organisation changes during the course of the Program;
- I am a principal of the business/ representative of the not-for-profit organisation and I am duly authorised to make this Declaration.

This declaration is true a	nd I know that it is an o	offence to make a declaration	on that
is false in any material pa	articular *		

○ Yes

This dec	laration is made	at *		
location de	eclaration is made i/e	e Darwin		
Name *				
Title	First Name	Last Name		
Date of birth *				
Must be a	date.			
Position	held *			
Eg. Busine	ss Owner, Director, (Chairperson, Secret	ary, Treasurer, Public Officer etc	
Date of	declaration *			
Must be a	date.			