

Territory Infrastructure Loans Application Form

Form Preview

Business and Contact Information

* 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

Entity Type *

Please select your entity type, if Other is selected please specify Entity Type.

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 | More information |
| ACNC Registration | |
| Tax Concessions | |
| Main business location | |

Must be an ABN.

Business primary address *

Address

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

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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 *

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Please provide length of operation in Months

Primary Locations in NT for operations and service delivery *

- | | |
|---|---|
| <input type="checkbox"/> Darwin and surrounding areas | <input type="checkbox"/> Daly-Tiwi-West Arnhem |
| <input type="checkbox"/> Barkly | <input type="checkbox"/> East Arnhem |
| <input type="checkbox"/> Katherine | <input type="checkbox"/> Central Australia (outside of Alice Springs) |
| <input type="checkbox"/> 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.

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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.

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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 of 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 rate and amount outstanding.

Schedule of existing borrowings *

Attach a file:

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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 *

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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?

Yes No

Have you had this property valued by a certified valuer in the last 3 months for mortgage lending purposes? *

Yes 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.

Copy of valuation

Attach a file:

An appraisal by a real estate agent is not accepted

Details of property 2 offered as security

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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?

Yes

No

Property 2: Have you had this property valued by a certified valuer in the last 3 months for mortgage lending purposes? *

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

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Address

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 3: Have you had this valued by a certified valuer in the last 3 months for mortgage lending purposes? *

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

Indigenous Engagement Strategy

* indicates a required field

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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 LJF-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 engagement strategy *

Attach a file:

Names and contact details of advisors

* indicates a required field

Please provide all names and contact details of advisors.

Accountant

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Name *

Organisation Name

ABN *

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| Tax Concessions | |
| Main business location | |

Must be an ABN.

Address

Address

Name *

Title First Name Last Name

 Position ***Email ***

Must be an email address.

Phone Number *

Must be an Australian phone number.

Legal

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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.

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| ATO Charity Type | More information |
| ACNC Registration | |
| Tax Concessions | |
| Main business location | |

Must be an ABN.

Address

Address

Name

Title First Name Last Name

Position

Email

Must be an email address.

Phone Number

Must be an Australian phone number.

Bank

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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.

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| DGR Endorsed | |
| ATO Charity Type | More information |
| ACNC Registration | |
| Tax Concessions | |
| Main business location | |

Must be an ABN.

Address

Address

Name

Title First Name Last Name

Position

Email

Must be an email address.

Phone Number

Must be an Australian phone number.

Details of Intellectual Property

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Please visit [IP Australia](#) 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 [Policy Framework](#) of the **NAIF Local Jobs Fund (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 and I know that it is an offence to make a declaration that is false in any material particular *

- Yes

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This declaration is made at *

location declaration is made i/e Darwin

Name *

| Title | First Name | Last Name |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |

Date of birth *

Must be a date.

Position held *

Eg. Business Owner, Director, Chairperson, Secretary, Treasurer, Public Officer etc

Date of declaration *

Must be a date.