

Visitation Reliant Application Form

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Visitation Reliant Small Business Support Application

* indicates a required field

The purpose of the Visitation Reliant Small Business Support Program ('Program') is to support small businesses operating in a range of tourism and hospitality related sectors that have been impacted due to restrictions on travel put in place by interstate governments and the subsequent drop in visitation to the Northern Territory.

The Program is available for a number of sectors of the tourism and hospitality market that have been impacted.

BEFORE YOU START: you must read and agree to the Program [Terms and Conditions](#) in full. Note in particular:

In order to participate in the Program a business must meet the definition of an Eligible Recipient. An Eligible Recipient may only apply once for a grant regardless of the number of premises from which it operates.

Eligible Sector/s include, but are not necessarily limited to:

- Wholesale and retail trade
- Provision of accommodation and/or food services
- Transport, postal, warehousing and/ or storage of stock in trade
- Education and training
- Provision of arts and/ or recreational services

An **Eligible Recipient**:

- 1.is a Territory Enterprise that operates solely in one or more Eligible Sector/s; and
- 2.held a valid Australian Business Number (ABN) and was registered for Goods and Services Tax (GST) as at 1 July 2019; and
- 3.is actively trading with an annual Turnover of more than \$75,000 and less than \$10 million; and
- 4.has had to temporarily cease or significantly reduce trading (ie. suffers a drop of 30% or more in turnover from 1-31 July 2021 as compared to the same period in 2019) as a direct result of the downturn in visitor numbers to the Northern Territory (whether because of government imposed restrictions or not); and
- 5.does not have an outstanding debt due and payable to Tourism NT or the Northern Territory Government.

To be an Eligible Recipient a not-for-profit organisation must be validly incorporated under Northern Territory or Commonwealth legislation and must be fully compliant with all its statutory obligations.

The Department will decide in its absolute discretion whether an applicant is an Eligible Recipient.

A **Territory Enterprise** is a business that satisfies all of the following:

- operating in the Northern Territory - the enterprise is currently engaged in productive activities out of premises within the Northern Territory (i.e. production of goods or delivery of services); and
- has a significant permanent presence - the enterprise maintains an office, manufacturing facilities or other permanent base within the Northern Territory; and

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- employs Northern Territory residents.

The Department reserves the right to conduct an Audit at any time during and within 12 months after the Program ends.

Business Eligibility

I have read and agree to the requirements stated above *

- Yes No - ineligible - do not continue

I am an Eligible Recipient as defined under the Program Terms and Conditions (Items 1 to 5 above) *

- Yes No - ineligible - do not continue

This application is not submitted by anyone other than myself as the Eligible Recipient *

- Yes No - ineligible - do not continue

I consent to my personal information being shared between/ with relevant NT Government and external agencies/ advisers/ bodies for the purposes of ascertaining and validating my eligibility under this Program *

- Yes No - ineligible - do not continue

Other Programs

Excluded Recipients are businesses that have already received (or are expected to receive on approval of a current application) support through either the Arts and Culture COVID-19 Interruption Support Package or the Visitation Reliant Small Business Support Program.

Have you applied to or received funding under the Arts and Culture COVID-19 Interruption Support Package? *

- No Yes - ineligible - do not continue

Have you applied to or received funding under the Tourism Survival Fund? *

- No Yes - ineligible - do not continue

Monitoring and evaluation of the Program

These questions are for research and evaluation purposes only. Your answers are not used as part of your registration and will remain confidential.

How did you hear about the Program? *

- | | | |
|---|--|---|
| <input type="checkbox"/> Newspaper | <input type="checkbox"/> TV | <input type="checkbox"/> Friend/ family/ acquaintance |
| <input type="checkbox"/> Social media | <input type="checkbox"/> Radio | <input type="checkbox"/> Other: <input type="text"/> |
| <input type="checkbox"/> Internet search engine | <input type="checkbox"/> Press Release/ Announcement | |

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Eligible Sectors

Eligible Sector/s include, but are not necessarily limited to:

- Wholesale and retail trade
- Provision of accommodation and/or food services
- Transport, postal, warehousing and/ or storage of stock in trade
- Education and training
- Provision of arts and/ or recreational services

As per the T&C definitions above, my business operates in (you can select more than 1 option) *

- Wholesale and retail trade
- Provision of accommodation and/or food services
- Transport, postal, warehousing and/ or storage of stock in trade
- Education and training
- Provision of arts and/ or recreational services

Select type of business: *

Upload payroll summary (MUST include employee names) *

Attach a file:

2020/21 Annual Turnover

Upload evidence of annual turnover to demonstrate the applicant business is actively trading and has an annual turnover of at least \$75,000 and less than \$10 million

This **MUST be** provided from an accounting software or certified by an accountant/ ATO.

Valid evidence of turnover can be:

- Profit and Loss statement (2020/21 FY); or
- 4 x BAS statements (2020/21 FY); or
- Notice of Assessment (2020/21 FY); or
- A letter from a certified accountant confirming your annual income.

Excel spreadsheets and bank statements will **NOT** be accepted

Select evidence of turnover you are supplying *

Upload annual turnover *

Attach a file:

COVID-19 Impact

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As a result of the downturn in visitor numbers to the Northern Territory, my business has: *

Downturn in turnover

Provide turnover for the periods:

- 1-31 July 2019; and
- 1-31 July 2021

This **MUST** be provided from an accounting software or certified by an accountant/ ATO.

Valid evidence of turnover can be:

- Profit and Loss Statement; or
- Monthly BAS Statement; or
- Notice of Assessment; or
- A letter from a certified accountant

Excel spreadsheets and bank statements will **NOT** be accepted

1-31 July 2019 Turnover

Upload July 2019 Turnover *
Attach a file:

1-31 July 2021 Turnover

Upload July 2021 Turnover *
Attach a file:

Business details

Business 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.

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Your entity name must be the entity name as per the ABR result above. **This is NOT your trading name.**

Entity Name *

Organisation Name

Your entity name must be the entity name as per the ABR. This is NOT your trading name.

Trading Name *

Legal Entity Type *

Company Partnership Sole Trader Trust Not-for-Profit

Trust Deed

If your Legal Entity is a **Trust**, you will need to upload a copy of the Trust Deed to provide confirmation of who your Trustee is.

Legal Entity name in the Business details section should be written as;

- ABC Pty Ltd the trustee as ABC Family Trust
- John Smith the trustee as ABC Family Trust

Please contact your accountant if you are unsure.

Trustee Name *

Organisation Name

This must be the Trustee of the Trust

Upload copy of Trust Deed *

Attach a file:

Business contact details

BUSINESS PHYSICAL ADDRESS

A valid address **MUST** include shop/office/unit numbers where applicable.

If no search results are found, please click "**Can't find your address?**" in the drop down

Business Physical Address *

Address

Please remember to include shop/office/unit numbers. If no search results are found, please click "Can't find your address?"

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Please provide a phone number you can be contacted on if required. Include area code if a landline. Must contain 10 characters eg 0889995511.

Do NOT include spaces or anything other than numbers.

Business contact phone number *

Please provide a phone number you can be contacted on if required. Include area code if a landline. Must contain 10 characters eg 0889995511

Business email address *

Please enter your preferred email address for all written correspondence. Notification of application outcome will be sent here.

Website URL or social media platform

Must be a URL.
Business website, Facebook, LinkedIn etc.

Principal of the business contact details

Must be the principal of the business's contact details (owner, director, partner, chairperson of the Board). The Department will use the below details to make contact with you, should we require anything further.

Full name *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Position *

Must be a principal of the business

Phone number *

Include area code if a landline

Alternate phone number

Include area code if a landline

Email *

Must be an email address.

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Declaration

* indicates a required field

Unattested Declaration under the Oaths, Affidavits and Declarations Act

You must be able to tick every item under 'solemnly and sincerely declare' below for your application to be considered.

I (insert full name) *

- To view the Visitation Reliant Small Business Support Program ('Program') Terms & Conditions, click [here.](#)
- To view the Department's Privacy Statement, click [here.](#)

solemnly and sincerely declare *

- All information (including in any supporting documents) provided in this application is true and correct in every particular; and
- I have read, understood and agree to comply with the terms and conditions of the Program; and
- I have read, understood and agree to the Privacy Statement; and
- I am the principal of the business and this application is submitted for my business; and
- My business is a valid Territory Enterprise; and
- My business operates solely in one or more Eligible Sector/s; and
- My business held a valid Australian Business Number as at 1 July 2019; and
- My business was registered for Goods and Services Tax (GST) as at 1 July 2019; and
- My business is actively trading with an annual turnover of at least \$75,000 and less than \$10 million; and
- My business has had to temporarily cease or significantly reduce trading as a direct result of the downturn in visitor numbers to the Northern Territory; and
- My business does not have an outstanding debt due and payable to Tourism NT or the Northern Territory Government
- No other application for a grant payment under this Program has been made by any other person in relation to the business the subject of this application; and
- I will advise the Department immediately if any of the information, details or supporting documentation provided in this application change during the course of the Program; and
- I understand that if this declaration is incorrect in any particular, I may be required to return a grant to the Northern Territory Government

This declaration is true and I know that it is an offence to make a declaration that is false in any material particular. *

Yes, I understand

This declaration is made at *

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Location or town the declaration is made at, eg. Darwin, Alice Springs, etc.

The person making this declaration **MUST** be a principal of the business applying ie. Director, Sole Trader, Partner etc.

Name *

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

Date of birth *

Must be at least 18 years of age.

Position/ Title *

Must be a principal of the business applying ie. Director, Sole Trader, Partner etc.

Date of declaration *

Must be a date.