### About the grant

\* indicates a required field

### **Program Details**

This grant is funded and administered by **Sound NSW**.

The 2024-25 Venue Upgrade Grants - Program 2 ('the Program') a Venues Unlocked initiative, is an open, competitive round.

This series of funding programs is designed to support NSW contemporary live music venues with varied experience in live music programming. It aims to increase the number of fit-for-purpose live music venues across the state, uplift sector knowledge and expertise, improve audience experience and generate greater live music diversity and vibrancy in communities.

This grant is available for dedicated live music venues to support venue upgrades that enhance audience and visitor experience. Funding will support the purchase of equipment and a range of infrastructure development works.

#### Equipment:

- purchase of production equipment (sound, lighting and staging)
- purchase of video screen (audio visual) technology.

#### Infrastructure works:

- soundproofing
- ventilation
- accessibility
- energy efficiency improvements.

#### **Program 2 - Key Information**

• Grant Type: Open, competitive

• Grant amount: Up to \$250,000 (ex GST) per grant application

• Applications open: Monday 13 January 2025

• Applications close: Monday 14 April 2025, 3pm

Applicants must co-contribute at least 30% of the overall project budget (this can include cash and in-kind contributions). In kind contributions can include any donated goods, services or volunteer work to support a project.

#### **Information sessions**

Sound NSW team members will host online information sessions covering an overview of the 2024-25 Venue Upgrade Grants (Program 2), how to apply, resources to support applications and a O&A.

While not mandatory, Sound NSW strongly recommends attending an information session before applying for this program.

Information sessions will be held on:

- Tuesday 28 January 2025 at 11:30am 12:30pm
- Register here

#### **Instructions for applicants**

Before applying, please carefully read the **Program Guidelines** and **FAQs** 

Incomplete applications and/or applications received after the closing date may not be considered.

### **Sound NSW support**

Sound NSW team members are here to help you and can be contacted between 9am and 5pm Monday to Friday (excluding public holidays) via:

- Telephone: Venue Support Coordinator, Rosie Saul, +61 2 9228 3603
- Email: rosie.saul@sound.nsw.gov.au

Do you wish to receive updates about other grant opportunities, initiatives of events from Sound NSW? *  `Yes  No  Eligibility  * indicates a required field  Is your venue located in New South Wales? *  `Yes  No	or
Eligibility  * indicates a required field  Is your venue located in New South Wales? *	
* indicates a required field  Is your venue located in New South Wales? *	
Is your venue located in New South Wales? *	
O Tes	
Is your venue an incorporated entity or trust (including a trust with a corporate or individual trustee) holding an Australian Business Number (ABN), or an Australian Company Number (ACN) or is registered with NSW Fair Trading unthe Associations Incorporation Act 2009 or the Co-operatives National Law (National Law) Act 2009 or the Co-operatives (Adoption of National Law) Act 2009 or the Co-operatives (Adoption of National Law)	nder NSW)
○ Yes ○ No	
	mum?
Does your venue have live music programmed for 3 nights a week at a minim *	
Does your venue have live music programmed for 3 nights a week at a minim  * ○ Yes ○ No	
*	
or individual trustee) holding an Australian Business Number (ABN), or an Australian Company Number (ACN) or is registered with NSW Fair Trading un the Associations Incorporation Act 2009 or the Co-operatives National Law (No set out in the appendix to the Co-operatives (Adoption of National Law) Act 2009	nd NS

You have indicated that you do not own the premises (building) the venue operates from. Are you able to provide a copy of your current lease or occupancy agreement showing at least 2 years remaining of the original term from the application close date? \*

○ Yes	○ No
Are you able to provide a letter of supposupporting your application to this progr	
Unable to continue	
<ul> <li>Friday (excluding public holidays) via:</li> <li>Telephone: Venue Support Coordinator</li> <li>Email: rosie.saul@sound.nsw.gov.au</li> </ul>	- Rosie Saul, +61 2 9228 3603
Further Eligibility	
* indicates a required field	
Are you able to provide a co-contribution grant amount in the form of cash and in- O Yes Note: Dedicated live music venues that demonstra music in NSW may request to have their co-contrib	kind services? *  O No te an exceptional contribution to contemporary
marketing? *	programming prominent in the business
○ Yes	○ No
Does your venue have a room or space d that is a significant part of the venue and support regular live music performances	d contains appropriate infrastructure to
O Yes i.e. separate auditorium, lighting, sound desk etc?	○ No
Does your venue have formal arrangeme artist performances? *	ents in place establishing payments for
○ Yes	○ No
Does your venue have ongoing performa as a defining feature of the business? *	
○ Yes	○ No
Does your venue program artists and act contemporary music? *	ts performing new and original
○ Yes	○ No

<b>Does your venue hold a OneMusic licenc</b> ○ Yes	e? * ○ No
<b>Does your venue operate on a member-oinvite-only functions that are not genera</b> O Yes	
<b>Does your venue operate more than 10</b> € ○ Yes	gaming machines? *  O No
Does your venue have Producer/Wholesa Licences? *	
○ Yes	○ No
Is your venue operated by Government (provider? *	Federal, State or Local), or an education
O Yes Note: Crown leased properties are eligible where of	O <b>No</b> operated by an otherwise eligible entity.
Is your venue owned and/or operated by ○ Yes	a religious institution? * ○ No
Is your venue a vessel (a boat on water)  ○ Yes	or a mobile venue of no fixed address? * ○ No
Please contact Sound NSW	
Based on your response to the above Eligibili apply. Refer to the <b>Program Guidelines</b> for	ty questions, you <b>may</b> be unable to continue to more details.
Special consideration may be given to venue criteria. If you can demonstrate significant co ecosystem, please contact Sound NSW to dis	ntribution to the contemporary live music
Sound NSW staff are here to help you and cato Friday (excluding public holidays) via:	n be contacted between 9am and 5pm Monday
<ul> <li>Telephone: Venue Support Coordinator</li> <li>Email: rosie.saul@sound.nsw.gov.au</li> </ul>	r - Rosie Saul, +61 2 9228 3603
Have you spoken to a Sound NSW staff r  ○ Yes	member about your application? *  O No
Unable to continue	
Based on your response to the above Eligibili apply. Refer to the <b>Program Guidelines</b> for	
Sound NSW staff are here to help you and call	n be contacted between 9am and 5pm Monday

• Telephone: Venue Support Coordinator - Rosie Saul, +61 2 9228 3603

• Email: rosie.saul@sound.nsw.gov.au

to Friday (excluding public holidays) via:

# **Eligibility Confirmation**

I confirm that I've read the guidelines and the information supporting our eligibility is accurate  $\mbox{\ensuremath{^{\ast}}}$ 

O Yes

### **Contact Details**

\* indicates a required field

Organisation Details

#### Organisation Name \*

Organisation Name

Please use the organisation's full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

### **Primary Address**

Address



### **Postal Address**

Address

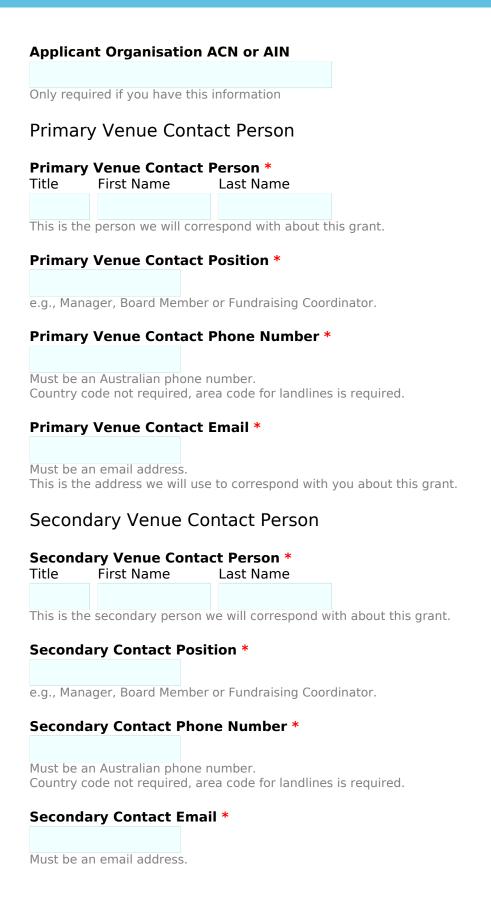
Primary Phone Number	*
Must be an Australian phone	number.
	ea code for landlines is required.
Other Phone Number	
Must be an Australian phone Country code not required, a	number. rea code for landlines is required.
Email Address *	
Must be an email address.	
Website	
Must be a URL.	
Does the applicant orga  ○ Yes  ABN *	nnisation have an Australian Business Number (ABN)? *  O No
ADIT	
The ABN provided will be check that you have enter	used to look up the following information. Click Lookup above to ed the ABN correctly.
Information from the Austra	an Business Register
ABN	
Entity name	
ABN status	
Entity type	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information

Must be an ABN.

ACNC Registration
Tax Concessions

Main business location

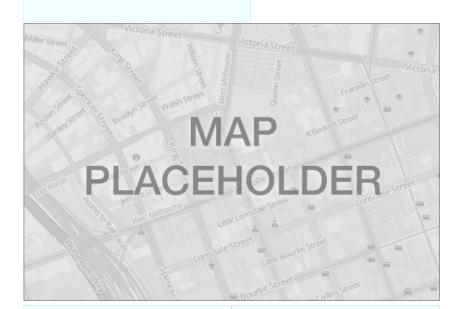
# ACN or AIN



# **Application Details**

\* indicates a required field

Title *	
Word count: Must be no more than 25 words. Provide a name for your initiative. Your title sh	ould be short but descriptive.
Brief description *	
Word count: Must be no more than 50 words. Include a brief summary of who will benefit fro outcomes you expect from your activities.	m this initiative, what activities you will do and what
Anticipated start date *	
Anticipated end date *	
Primary location of your initiative Address	



Primary location does not need to be a specific address, and can be postcode, suburb, state, etc. If delivered online, please specify the area of focus for delivery.

### Please update anticipated start/end date

The project start date must be after 14/03/2025 and the project end date must be before 30/06/2026.

Please update the details above to ensure your dates fit within these timeframes or your application will be deemed ineligible.

### Diversity, access and inclusion

Please indicate if your venue or live music programming is targeted towards any of these

groups:	-	·		•
First Nations F  O Yes	People *		People living and/or working in O Yes	n Western Sydney * ○ No
People with di	sability and/or who are d/l No	Deaf *	People living and/or working in O Yes	n Regional NSW * O No
People from cu	ulturally and linguistically	diverse (CaLD) background	Is People who identify as women	and non-binary *
○ Yes	○ No		0 .55	0
Young People O Yes	under the age of 25 *  O No			
Outline h		t considers thes	e groups in the plar	nning and delivery of
Word cou Must be no	nt: more than 200 wo	rds.		
Local G	overnment Co	ouncil		
<b>Do you h</b> ○ Yes	ave a relationsl	nip with your loc	al government cour No	ncil? *
Local G	overnment Co	ouncil Details		
Please pro	ovide the contact	details for your co	uncil contact.	
Name * Title	First Name	Last Name		
THE	i ii Se ivanic	Last Wallic		
Email *				

Mark		
Must be an email address.		
Phone Number *		
Must be an Australian phone number.		
Liquor Licence		
Do you hold a liquor licence? * ○ Yes	○ No	
Liquor Licence Number		
Provide your liquor licence number belo	w *	
Where multiple liquor licences are held side by sid licence applying to the live music performance are		e details of the liquor
About Your Venue Upgrades		
* indicates a required field		
Demonstrated impact to the conte	mporary live music	ecosystem
Describe how your venue contributes to in NSW. Tell us in detail about:	the contemporary live	e music ecosystem
<ul> <li>your experience in delivering content examples)</li> <li>demonstrate frequency of live music         <ul> <li>Programming live music at least</li> <li>A consistent schedule that fosters</li> <li>Featuring predominantly original, emerging artists and showcasing A</li> </ul> </li> <li>the diversity of live music programment</li> </ul>	c programming including a nights per week the local and touring much contemporary music, supartical talent	<b>ng:</b> usic ecosystems
*		
Word count: Must be no more than 500 words.		

# Project Plan

As part of your application for this program, you must complete a detailed project plan with proposed scope of work based on venue assessment reports, to support an investment

by Sound NSW in venue infrastructure	upgrade	works (i.e.	. soundproofing,	ventilation,
accessibility, energy improvements).				

Please download the project plan and complete it.

Once complete upload it here: * Attach a file:	
Venue Assessment Reports	
Attach copies of all assessment reports	informing the works in your project plan
template * Attach a file:	informing the works in your project plan

### Demonstrated viability of proposed venue upgrades

#### Detail the proposed infrastructure upgrades:

- what improvements are you seeking funding for?
- how will they enable the venue to be fit-for purpose to regularly host contemporary live music?
- your commitment to accessibility, sustainable operations, and sound management practices ie. energy efficiency and soundproofing measures to minimize neighbourhood impact, balancing venue activities with community interests.
- how the activity will compliment this funding to enhance expertise and establish best practice business operations

*
Must be no more than 500 words.

#### Financial Information

\* indicates a required field

Total Amount Requested	\$		
•	What is the total financia grant?	I support you are requesting	under this

### Project Budget Template

You are required to complete a budget template. This provides a detailed project budget, identifies a 30% cash/in kind contribution to overall project budget, confirms a cash contingency fund of minimum 10% of overall budget, and confirms the appropriate planning pathway for any works proposed (exempt, complying, DA)

Please download the budget template and complete it.		
Once complete, upload the budget template here: * Attach a file:		
A maximum of 1 file may be attached.		
Quotes		
Attach copies of 2 quotes for each labour or purchase expense item in your project budget template (for comparison and to show value for money) *  Attach a file:		
Account a file.		
Supporting Documentation		
* indicates a required field		
New and original contemporary live music		
You are required to provide evidence of new and original contemporary live music programming, established relationships with artist and music businesses, and how your venue's contribution increases the diversity of live music to improve audience experiences		
Attach example/s here: * Attach a file:		
Attach examples of support letters from relevant artists and music businesses, proof of live music events such as photos, website or publicly available program etc.		
You have indicated that you do not own the premises (building) the venue operates from		
Current Lease/Occupancy Agreement		
Please provide a copy of your current lease or occupancy agreement showing at least 2 years remaining of the original term from the application close date * Attach a file:		
A maximum of 2 files may be attached. Alternatively, please follow Sound NSW advice		
Letter of Support		

Please provide a letter of support from the building	/ premises owner	supporting
your application to this program *		

Attach a file:

A maximum of 1 file may be attached. Alternatively, please follow Sound NSW advice

### OneMusic Licence

You are required to provide a copy of your OneMusic licence as part of your application.

Attach copy of OneMusic licence here: \*
Attach a file:

A maximum of 1 file may be attached.

#### Declaration and Authorisation

\* indicates a required field

#### Disclaimer

The applicant acknowledges and agrees that:

- Changes to the application and any additional materials cannot be submitted after the advertised closing date and time.
- Sound NSW has the right to investigate any information provided in this application and/or to request additional information where Sound NSW deems it necessary for the purpose of assessing your application or administering the Program.
- Sound NSW may re-open an application after the closing date, provided it doesn't give the applicant an advantage over other applicants.
- Sound NSW staff are not able to provide advice on content or choices required within an application.

### **Privacy Notice**

Sound NSW (part of the Department of Creative Industries, Tourism, Hospitality and Sport (The Department)) is collecting your personal information for the following purposes:

- To assess your application against the eligibility criteria for the Sound NSW Venue Upgrade Grants Program 2
- If your application is deemed eligible, for Sound NSW to subsequently administer the Program;

- For Sound NSW to publish your personal information in a way it deems necessary in order to publicise your connection to the Program; and
- For Sound NSW to monitor and evaluate the Program.

Sound NSW will not use your personal information for any other purposes. Providing your personal information to Sound NSW is voluntary, however Sound NSW may not be able to assess your suitability for the Program if you choose not to provide it.

Sound NSW will not disclose your personal information to anybody else unless you have given your consent, or Sound NSW is required or authorised to by law, such as by court order or under the *Government Information Public Access Act 2009* (NSW) (GIPA Act).

You have the right to access your personal information and/or correct your personal information held by Sound NSW without excessive delay or expense.

If you would like to know more about how Sound NSW meets its regulatory obligations in collecting, using, sharing, and storing personal information, you can read the Department's complete Privacy Policy <a href="https://example.com/here">here</a>.

If you have any questions about this Privacy Notice, or you would like to access or correct your personal information, please contact the Department on the details below:

Legal Officer (Privacy)Department of Creative Industries, Tourism, Hospitality and SportGPO Box 5341Sydney NSW 2000information@dciths.nsw.gov.au

#### Use of Information

The applicant acknowledges and agrees that:

Subject to privacy legislation, if Sound NSW assesses your application as successful, the information contained in this application form may be used for media and communication purposes by Sound NSW and/or the NSW Government.

#### Declaration

Before you can complete and submit this application, you must accept the following conditions by declaring:

- I have the authority to complete and submit this application on the entity's behalf.
- All information supplied as part of this application will be true and accurate to the best of my knowledge.
- All activities proposed by this application will be conducted in accordance with current legislation, including but not limited to, complying with Working with Children legislation.
- I acknowledge funding will not be released if the entity has outstanding acquittals for this or other projects/programs across Sound NSW (including Create NSW).
- I acknowledge Sound NSW has the right to withdraw any offer of funding or demand the return of funds already paid if my declaration is found to be incorrect or misleading.

# Authorisation

I agree *	□ Yes			
Name of authorised person *	Title  Must be a sauthorised	First Name senior staff member,	Last Name board member or	appropriately
Position *		ld in applicant organ	nisation (e.g. CEO, T	reasurer)
Phone number *	We may co	Australian phone nuntact you to verify to licant organisation		is authorised
Email *	Must be an	email address.		