

## **Major Capital Expenditure (Over \$100,000) Notification to SLSQ**

Pursuant of the SLSQ Bylaws, the following completed form is provided to SLSQ to notify of potential capital expenditure associated with the named Surf Life Saving Club under the Lifesaving Trademark.

### **PART 1 (To be completed and sent to SLSQ upon initiation of project):**

Club/Branch \_\_\_\_\_ Date \_\_\_\_/\_\_\_\_/\_\_\_\_

#### **1. Brief Outline of Proposed Expenditure (Including Purpose and indicative cost.)**

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Select one of the following Capital Expenditure/s classes associated with this project (please tick):-

☐ Alterations

☐ Additions

☐ Improvements

☐ New Premises

☐ Acquisition of Property

#### **2. Property Details (Where Property is involved)**

Address:

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Title: Leased ☐ Owned ☐ Type \_\_\_\_\_

Expiry Date of Lease: \_\_\_\_/\_\_\_\_/\_\_\_\_

Lease Details Stated Conditions of Use:

*Detail of any options to renew*

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#### **3. Club Executive or General Meeting Details**

Has this project / proposal been endorsed by the club executive and/or members at an appropriate club meeting? Yes ☐ No ☐

Date Meeting Held: \_\_\_\_/\_\_\_\_/\_\_\_\_ Number of Members Present: \_\_\_\_\_

Copy of relevant Club meetings to be attached.

Outcome:

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Name: \_\_\_\_\_  
President

\_\_\_\_\_  
Treasurer

Signed: \_\_\_\_\_  
President

\_\_\_\_\_  
Treasurer

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date

#### **4. Branch Notification:**

Has this project / proposal been endorsed by the relevant Branch? Yes ☐ No ☐

Please attach Branch acknowledgement/comments.

#### **Additional Assistance**

(Please outline any areas that SLSQ may be of further assistance to your Club/Branch in relation to the above proposals).

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Is a formal acknowledgement from SLSQ required to assist with obtaining borrowed funds associated with this project? Yes ☐ No ☐

**Part 2 (To be completed and sent to SLSQ once detail documentation and finance has been determined, include the previously completed Part 1 also):**

## 5. Architectural Documentation/Plans

Have detailed Architectural Plans and Cost Estimates been undertaken / completed by a qualified Consultant and Quantity Surveyor? Yes ☐ No ☐

Consultant: \_\_\_\_\_ QS: \_\_\_\_\_

## 6 Financing Arrangements

Please advise on how the funding for this project is to be undertake including the value:

☐ Club Funds Amount \$\_\_\_\_\_.  
☐ Grants (Government) \_\_\_\_\_ Amount \$\_\_\_\_\_  
☐ Donations, \_\_\_\_\_ Amount \$\_\_\_\_\_  
☐ Fundraising, \_\_\_\_\_ Amount \$\_\_\_\_\_  
☐ Other \_\_\_\_\_ Amount \$\_\_\_\_\_

☐ Borrowing Institution: \_\_\_\_\_ Amount \$\_\_\_\_\_

☐ Security: Mortgage ☐ Personal Guarantees ☐  
Interest Rate: \_\_\_\_\_% (Fixed/Variable)

Repayments: \$\_\_\_\_\_- Per \_\_\_\_\_ Term of Loan: \_\_\_\_\_

## 7. Financial Information Enclosed (Where Borrowings are involved)

Has a professional assessment of cashflow and balance sheet been undertaken for this project.

Yes ☐ No ☐ and provided with this notification? Yes ☐ No ☐

Profit & Loss ☐ Most Recent ☐ Previous Year

Balance Sheet Yes ☐ No ☐ ☐ Most Recent ☐ Previous Year

Cash Flow Projections Yes ☐ No ☐

### Request for formal Acknowledgement

#### NO OBJECTION TO THIS PROJECT

based on the information contained in the above notification.

\_\_\_\_\_  
President

\_\_\_\_\_  
Treasurer

\_\_\_\_/\_\_\_\_/\_\_\_\_  
Date