

# CITY OF BELMONT SUBMISSION DOCUMENTS

## Part B Application to Lease Submission Documents Office Space 2<sup>nd</sup> Floor, Belmont Hub 213 Wright Street, Cloverdale

Chief Executive Officer  
City of Belmont  
Civic Centre  
215 Wright Street  
CLOVERDALE WA 6105

**Closing on 1 October 2020**

Enquiries must be in writing to:

Coordinator Property  
[properties@belmont.wa.gov.au](mailto:properties@belmont.wa.gov.au)

Submitted by: \_\_\_\_\_

*Creating opportunities*



# CITY OF BELMONT

## Application to Lease Office Space 2nd Floor, Belmont Hub, 213 Wright Street, Cloverdale

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**3 FORM OF APPLICATION**

**The Chief Executive Officer**

City of Belmont  
 215 Wright Street  
 CLOVERDALE WA 6105

Having examined the documentation for the Lease of office space 2<sup>nd</sup> Floor, Belmont Hub, 213 Wright Street, Cloverdale, please accept this Application to enter into a proposed lease.

This Application is submitted in accordance with the Conditions outlined in the Part A documentation and all other documentation by which, in consideration of the City undertaking to assess this Application with the other Applications received.

I acknowledge that the City of Belmont may determine that it is not advantageous for the City to accept any Application on the basis of:

- any justifiable comments from a referee; or
- any evidence from a property manager of the City of Belmont or service providers who has recently managed a lease with this Applicant.

**THIS APPLICATION IS TO BE SIGNED BY A PERSON AUTHORISED TO DO SO**

Signature: \_\_\_\_\_

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

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

Witnessed: \_\_\_\_\_

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

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

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**FORM OF APPLICATION  
(Applicant to complete)**

**Full Corporate Name:** \_\_\_\_\_

**ACN:** \_\_\_\_\_ **ABN:** \_\_\_\_\_

**Registered Trading Name:** \_\_\_\_\_

**Name of Principal Contact:** \_\_\_\_\_

**Position:** \_\_\_\_\_

**Applicants Contact Details**

Address of Applicant (including mailing address if different):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(State)

(Postcode)

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mobile: \_\_\_\_\_ E-mail: \_\_\_\_\_

## 4 SELECTION CRITERIA

### 4.1 Compliance Criteria

Please select with a yes or no whether you have complied with the following compliance criteria

| Description of Compliance Criteria  |          |
|---|----------|
| (a) Completed and returned Form of Application  | Yes / No |
| (b) Addressed each of the Weighted Criteria detailed below  | Yes / No |
| (c) Provided names and contact details of at least two (2) referees who can vouch for your suitability as a tenant  | Yes / No |
| (d) Provided evidence that the organisation is a not for profit organisation and Australian Charities and Not-for-profits Commission (ACNC) registered entity operating for benevolent or charitable purposes | Yes / No |
| (e) Agrees to co-operate with an independent financial assessor during the conduct of a financial assessment.   | Yes / No |
| (f) Compliance with attendance at any mandatory briefing or site inspection   | Yes / No |
| (g) Provide a copy of the last end of year financial statement  | Yes / No |

### 4.2 Weighted Criteria

Before responding to the following qualitative criteria, Applicants must note the following:

- All information relevant to your answers to each criterion are to be contained within your Application;
- Applicants are to assume that the Assessment Panel has no previous knowledge of their organisation, its activities or experience;
- Applicants are to provide full details for any claims, statements or examples used to address the qualitative criteria;
- Applicants are to address each issue outlined within a qualitative criterion; and
- Applicants must address each of the sub-criteria contained within 4.2.1 through to 4.2.4. The City will, at its discretion, score each of the sub-criteria based on the level of **evidenced experience and performance** contained in the applicant's response.

|   | CRITERIA                           | WEIGHTING   |
|---|------------------------------------|-------------|
| 1 | Organisational Profile             | 30%         |
| 2 | Community Needs and Social Benefit | 30%         |
| 3 | Delivery Model                     | 25%         |
| 4 | Stakeholder Management             | 15%         |
|   | <b>TOTAL</b>                       | <b>100%</b> |

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The City will offer a space which creates a positive working environment for tenants while providing a diverse range of services to our community at a welcoming and accessible location.

The City wishes to attract partners that support the diverse needs of our community and as such in your responses below it may be beneficial to review some of the City's key plans and strategies which are referred to Part A Section 2 of the application document (2.1).

#### **4.2.1 Organisational Profile 30% (Max 300 words)**

- Provide a brief description of your organisation and outline capacity and experience in your Target Demographic and Service area to be delivered as part of the proposed use of the premises.
- Outline the specific Target Demographic/s your organisation will work with in your proposed use of the premises as outlined below.

##### **Target Demographics**

- Aboriginal and Torres Strait Islander communities
  - Carers / Young Carers
  - Children
  - Culturally and Linguistically Diverse communities
  - Early Years
  - Families
  - People with Disability
  - Seniors
  - Young People
  - Other.
- Outline the specific Service area your organisation will work with in your proposed use of the premises, as outlined below

##### **Service Area**

- Aged Care provider
  - Crime Prevention / Community Safety
  - Drug & Alcohol
  - Emergency Relief
  - Employment
  - Financial counselling/support
  - Health support
  - Homelessness
  - Legal Advice/Support
  - Mental Health
  - National Disability Insurance Scheme (NDIS) provider
  - Social Support
  - Training/Educational Support
  - Volunteer support
  - Other.
- Provide evidence of capacity to meet financial obligations in relation to taking out a lease within the facility. This may include income streams or funding sources such as, grants, donations or self-funded activities.

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- Provide proof of ACNC registration as an attachment to application.

#### **4.2.2 Community Needs and Social Benefit 30% (max 500 words)**

- Provide a brief summary of your understanding of community needs in the City of Belmont.
- Describe how and to what extent your organisation will meet the needs of the Belmont community through the services you propose to offer.
- Describe the potential community and/or social benefit for the Belmont community from delivery of your services.
- Detail if and how delivery of your organisation's services will assist the City of Belmont to meet its strategic objectives.

#### **4.2.3 Delivery Model 25% (max 300 words)**

- Are you currently delivering services within the City of Belmont? If so, please provide details, including schedule of fees and charges.
- The City of Belmont is committed to contemporary community development practices, focusing on assets and opportunities, abilities, strengths and collaboration with our community. Describe your organisation's delivery/service model and how this model achieves positive outcomes for individuals and the broader community.
- Please provide an outline of your organisation's evaluation processes and an example of its implementation, including the achieved outcomes.

#### **4.2.4 Stakeholder Management 15% (max 200 words)**

- Provide an example/s of your ability to build successful stakeholder partnerships resulting in positive outcomes or significant positive change, which will benefit the City of Belmont community.
- Provide an example of your ability to identify partners and referral pathways for the benefit of your customers.
- What is your proposed approach to and what do you perceive are the benefits to working in shared premises?

#### **4.2.5 Additional information (not scored)**

- To provide assistance to your current and potential customers, the Belmont Hub has a designated space for a Crèche facility, which is located on the same floor as your potential office space. The provision of Crèche services will assist your customers with keeping their appointments, attending them on time and being able to focus and participate fully in meetings as they will know their children are being looked after. Do you have experience or an interest in providing Crèche services at the Belmont Hub?
- The City is likely to receive a high number of tenant applications as the location, access and amenities at the Belmont Hub are attractive to many organisations. Tell us what's your point of difference and why should you be the City's preferred tenant?

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## ADDITIONAL INFORMATION TO SUPPORT APPLICATION

### 4.3 Lease and Operational

- How soon after signing a lease agreement with the City will your organisation commence providing activities/services?
- What spaces as defined in Appendix 1 of the Application to Lease document are of most interest to you?
- How many staff do you propose to operate from the new premises?
- Will you be expecting to use:
  - Storage facility
  - Creche facilities
  - Shared meeting rooms
  - Car bays
    - How many bays (max 1 bay per 40sqm)
    - Note a monthly cost for car bays will apply

### 4.4 Frequency of Use of Facility

#### 4.4.1 When will your organisation be providing services?

- Business Hours
- Evenings
- Weekends
- Public Holidays

#### 4.4.2 How often will your organisation use the facility to provide services?

- Less than 10 hours per week
- Between 10 to 30 hours per week
- More than 30 hours per week

#### 4.4.3 How often will your organisation use the facility to undertake administrative duties (and is this concurrent or in addition to the above)?

- Less than 10 hours per week
- Between 10 to 30 hours per week
- More than 30 hours per week

#### 4.5 Organisational Business Planning

**4.5.1 Does your organisation have a management committee/ structure to administer the operations of the organisation? \***

Yes  No

**4.5.2 Does your organisation have a Business/Operational/Strategic or Forward Plan(s)? \***

Yes  No

\* Please list and attach copies where relevant.

**4.5.3 How will your group evaluate its services to assess if they are meeting users requirements?**

#### 4.6 Financial Reporting

Please attach copies of your current annual budget and any future financial planning budgets.

Please provide copies of the previous two years audited financial statements and reports.

#### 4.7 Funding Arrangements and Other Agencies/ Organisations Support

**4.7.1 How will your organisation fund its operations? (Please tick sources below)**

- Fee for services (Please provide schedule of fees and charges)
- Fundraising activities
- External funding
- Corporate funding
- Donations
- Other - please list:

**4.7.2 Does the organisation's operations have potential to attract additional external funding into the City for the provision of services/ programs?**

#### 4.8 Lease Offer

Provide details of the preferred length of tenure for the Lease and size of space required.

Provide preferred size of space required (see Part A, appendix 1, Second Floor Tenancy Plan)

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#### **4.9 Indicative Fit-out plan**

Provide an outline of your intended fitout, with a description and basic floor plan.