What is the Sub-Lease Allocation Plan?

The Sub-Lease Allocation Plan has been produced on behalf of the Mirarr to facilitate a transition to the new Jabiru Township Lease aligned with the Masterplan. The Sub-Lease Allocation Plan allows the Traditional Owners of Jabiru to provide informed consent to proposed sub-lessees about a future sub-lease from the head lessor of the new Township Lease planned for Jabiru. The consent of the Traditional Owners to the Sub-Lease Allocation Plan will empower the head lessor to implement sub-leases swiftly and without further consultations with Traditional Owners. The Sub-Lease Allocation Plan provides a significant transition tool and captures critical information required to oversee both the expiry of current sub-leases and commencement of new sub-leases. Jabiru Kabolkmakmen Ltd has been engaged to develop and maintain the Sub-Lease Allocation Plan Schedule.

What is the Allocation Request Form?

This Allocation Request Form (ARF) is the mechanism Jabiru Kabolkmakmen has developed to engage with all interested parties. The information on this form allows Jabiru Kabolkmakmen to complete a comprehensive review and prioritisation of all applications in accordance with consistent and equitable criteria for approval by the Traditional Owners. Approval of an application by the Traditional Owners means the request becomes an Approved Allocation in accordance with the Sub-Lease Allocation Plan.

Where a party has not provided up to date and sufficient information to Jabiru Kabolkmakmen, that party may experience a delay and the approval process may not occur until a consultation process is conducted after commencement of the new Township Lease.

Who should complete this form?

Any organisation or business who has an interest in gaining access to residential, commercial or industrial properties located in Jabiru should complete this form. If you wish to secure certainty for your organisation or business operating in Jabiru in the future, then it is critical that you provide as much detail as possible of your requirements to ensure your application can be properly assessed and approved for allocation in the Sub-Lease Allocation Plan as early as possible.

What is an Approved Managing Entity (AME)?

An Approved Managing Entity (AME) is an employer or other agency that requires 20 or more residential lots for the purpose of long-term staff accommodation and has the financial capacity to adequately maintain and manage residential housing. If you would like to be considered as an AME please complete the AME Request Form and attach it to your ARF. If you qualify as an AME you may be eligible to sub-lease residential lots. For all other organisations, access to housing will be offered as a tenancy from a central housing provider.

Individual requests

Historically, Jabiru has always been an industry-based town. This will continue for the foreseeable future. Most applications for tenancies will be made via the employing organisation. A separate Tenancy Application Form will need to be completed for any individual, employment-based tenancies. These will require proof of employment.

How will the information in this form be used?

Jabiru is undergoing a transition from current leasing arrangements administered by the Jabiru Town Development Authority (JTDA) to a new leasing structure currently under negotiation. The information provided in this form will assist Jabiru Kabolkmakmen to:

* Record and process requests for business’ commercial and residential requirements
* Maintain an up-to-date forecast of all anticipated housing demand in Jabiru
* Assist in the assessment of applications for approval and allocation by the Traditional Owners
* Maintain a contact database to provide information about future arrangements as it becomes available

PLEASE ENSURE ALL SECTIONS OF THIS FORM ARE COMPLETE

**Please contact our office to arrange a time to review your form prior to submitting the completed form.**

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| **Date of Application:** | 2 June 2020 |

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| CONFIDENTIALITY AND PRIVACY | | | | |
| *Jabiru Kabolkmakmen Ltd will use its best endeavors to keep your Request confidential. Jabiru Kabolkmakmen is committed to the protection of your personal information and handling of that information in accordance with the Australian Privacy Principles and the Privacy Act 1988 (Cth) (Privacy Act). Jabiru Kabolkmakmen will collect personal information about you, in the course of you completing this Request Form and (if applicable) in the course of your tenancy. Jabiru Kabolkmakmen’s Privacy Policy sets out its procedures for the handling of personal information, and information on seeking access or correction, and about making a complaint, including how complaints will be handled. Should you require a copy of this policy, please email* [***operations@jabirukabolkmakmen.com.au***](mailto:operations@jabirukabolkmakmen.com.au)***.*** *By providing Jabiru Kabolkmakmen with personal information about a third party (e.g. a primary contact) you warrant that that person consents to Jabiru Kabolkmakmen collecting and handling their personal information in accordance with its Privacy Policy.* | | | | |
| APPLICANT DETAILS | | | | |
| 1.01 Legal Name of Applicant (Business Entity): | | | 1.02 ABN / ACN: | |
| Type here | | | Type here | |
| 1.03 Street Address: | | | 1.04 Postal Address: | |
| Type here | | | Type here | |
| 1.05 Type of Business Entity | | | 1.06 Public Risk Insurance: | |
| Company Other (Specify): Type here | | | Yes  No Amount cover held: $ | |
| PRIMARY CONTACT DETAILS (Person authorised to act on behalf of organisation regarding lease matters) | | | | |
| 1.07 Full Name: | Type here | 1.08 Position: | | Type here |
| 1.09 Phone/mobile: | Type here | 1.10 Email: | | Type here |
| SECONDARY CONTACT DETAILS | | | | |
| 1.11 Full Name: | Type here | 1.12 Position: | | Type here |
| 1.13 Phone/mobile: | Type here | 1.14 Email: | | Type here |
| DETAILS ABOUT THIS REQUEST | | | | |
| 1.15 Reason for submitting this allocation request (Select all that apply): | | | | |
| Securing certainty for existing business | | Housing for existing staff | | |
| Growing existing business | | Housing for planned staff increases | | |
| Starting a new business | | Housing for employees requiring private tenancy | | |
| Relocating business to the region | | Other: Type here | | |
| END OF SECTION 1 | | | | |

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| **Date of Application:** | 2 June 2020 |

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| GENERAL BUSINESS OPERATIONS AND SERVICES INFORMATION | | | |
| 2.01 Provide a summary of general business activities and services delivered by the organisation: | | | |
| Type here | | | |
| 2.02 Is your business a Not-for-Profit or Charity? | | Yes, Details (if any): *Type here*  No | |
| 2.03 Is your business Indigenous owned? | | Yes, Details (if any):  *Type here*  No | |
| 2.04 Is there any cultural or business affiliation with the traditional Aboriginal land owner group? | | Type here | |
| JABIRU BASED BUSINESS OPERATIONS AND SERVICES INFORMATION | | | |
| 2.05 Select your Primary Service Category in Jabiru: | | 2.06 Duration of operations in Jabiru? | |
| Select  Other (Specify): *Type here* | | *Type here* | |
| 2.07 Provide details of trades, services and other products the organisation specifically offers to Jabiru: | | | |
| Type here | | | |
| 2.08 Provide a description of your ongoing and/or new proposed business and investment activity.  \*Attach any relevant documentation that will assist in understanding the detail of your plans and/or proposed works.  \*Detailed information of commercial business plans requested in Section 3. | | | |
| Type here  Materials **attached(\*)** (Specify): Type here | | | |
| JABIRU BASED STAFFING AND PROVISIONS FOR HOUSING INFORMATION | | | |
| 2.09 CURRENT number of employees based in Jabiru: | | 2.10 PLANNED number of employees to be based in Jabiru: | |
| *Select* Full-Time | *Select* Part Time | *Select* Full-Time | *Select* Part Time |
| *Select* Casual | *Select* Contract | *Select* Casual | *Select* Contract |
| *Select* Apprentices/Trainees | *Select* Other | *Select* Apprentices/Trainees | *Select* Other |
| 2.11 Select intended provision of housing option for planned additional employees: | | | |
| Provided by NT Government - Government Employee Housing. | | | |
| Applicant is an Approved Managing Entity, housing will be allocated from applicant’s approved housing stock. | | | |
| Application for additional housing included in Section 3 of this request. | | | |
| Not yet needed, forecast housing demand provided and a new application will be submitted when required. | | | |
| Other, specify: *Type here* | | | |

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| ALIGNMENT OF BUSINESS OPERATIONS AND SERVICES WITH THE MASTERPLAN |
| How does your business align with the following Masterplan Goals? \**Note: this section will be used to assess applications for consistency with the Masterplan as required under clause 2.6 of the Jabiru Town Plan.* |
| 2.13 INDIGENOUS OWNERSHIP |
| ‘The town celebrates the traditional ownership of the Mirarr people and is founded on an agreement with the traditional owners for the current and future use of the land for the benefit of the local community, the region and the interests and values of Kakadu National Park.’ |
| *Type here* |
| 2.14 NATIONAL PARK TOWN |
| ‘The town celebrates its unique location through consistent building design, landscaping and civil works reflecting the World Heritage and national reserve status of Kakadu National Park with a theme and design utilising natural materials, textures and appearance.’ |
| *Type here* |
| 2.15 TOURISM TOWN |
| ‘The town is a key North Australian location for ecofriendly tourism, active outdoor tourism and Indigenous cultural tourism.’ |
| *Type here* |
| 2.16 SUSTAINABLE AND RESOURCE EFFICIENT TOWN |
| ‘The town showcases carbon neutral technologies for a wet tropical environment’ |
| *Type here* |
| 2.17 ICONIC CULTURAL HERITAGE DESTINATION |
| ‘The town celebrates the unique Indigenous cultural heritage significance of the region and provides a gateway for the Australian community to engage with Indigenous culture.’ |
| *Type here* |
| 2.18 INDIGENOUS EMPLOYMENT & ENTERPRISE CENTRE |
| ‘The town is a key location nationally for excellence and best practice in Indigenous land management knowledge and employment and supports bininj living on country in the northern section of Kakadu National Park.’ |
| *Type here* |
| 2.19 SUSTAINABLE RESIDENTIAL POPULATION |
| ‘The town attracts and retains long term residents to achieve a sustainable population commensurate with the town’s goals and compatible with Kakadu National Park.’ |
| *Type here* |
| 2.20 EDUCATION AND RESEARCH HUB |
| ‘The town is a key location for research in North Australian biodiversity, ecology, education, indigenous language, cultural heritage, and archaeology and is a gateway for education based tourism.’ |
| *Type here* |
| END OF SECTION 2 |

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| NON-RESIDENTIAL REQUEST DETAILS | | | | |
| *All organisations need to complete this section for any non-residential lots the organisation requires. This includes any industrial, commercial, retail, government services, office, utility or other non-residential uses.* ***\*Complete Section 3 for each individual lot or business premise request*.** | | | | |
| 3.01 Select which type of premise this request is for: | | Choose an item. | | Specify Use: Type here |
| 3.02 Provide details of any specific requirements: | | *Type here* | | |
| 3.03 Nominate preferred lease type: | | **Sub-Lease from new township entity  Commercial Tenancy Option** | | |
| 3.04 Nominate preferred address (if applicable): | | Lot No *Lot Number* **,** *Address* | | |
| 3.05 Do you currently operate from the above address? | | No  Yes (Specify): *Type here* | | |
| 3.06 If requesting sub-lease in 3.03 above, provide details of residential requirements to be linked to the sub-lease:  (eg. 1 house required for CEO for the term of the non-residential lease) | | | | |
| Type here | | | | |
| **TERM** | | | | |
| 3.07 Requested Term: | Start Date:  Type here | | End Date:  Type here | |
| 3.08 Term in years and months: | Years:  Type here | | Months:  Type here | |
| **DETAILS OF COMMERCIAL BUSINESS PLAN AT THIS PREMISE** | | | | |
| 3.09 Provide a brief description of your business plan orattach a copy*.* | | | | |
| Type here ; or  Business Plan **attached(\*)** | | | | |
| 3.10 Business experience: Provide details of your business background, experience and skills. Attach any relevant documentation that provides evidence to support your proposal. | | | | |
| Type here | | | | |
| 3.11Industry licences: To legally carry out the proposed activity, please state industry licences, permits and/or accreditations required for your proposal and supply copies of these documents. | | | | |
| Type here | | | | |

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| 3.12 What infrastructure developments and capital purchases are proposed? Please detail proposed timeframes for construction and purchase of capital items. If available, a scope of works and site plan should be included. | |
| Type here | |
| 3.13 Source of finance ($) | |
| Private  Bank / Finance Institution  Government Grant / Loan  Other (specify): Type here | |
| Estimated value of investment: $Type here | |
| 3.14 Government Assistance ($) | |
| Aboriginal Benefits Account (ABA) | Type here |
| Australian Government | Type here |
| NT Government | Type here |
| Local Government | Type here |
| Indigenous Land Corporation (ILC) | Type here |
| Other (Specify) | Type here |
| 3.15Other benefits: Outline any non-monetary benefits to Traditional Owners e.g. infrastructure, in-kind training and employment. | |
| Type here | |
| END OF SECTION 3 | |

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| RESIDENTIAL PREMISES REQUEST DETAILS (TENANCIES FROM HOUSING ENTITY) | | | | | | | |
| 4.01 Is the applicant organisation seeking approval as an *Approved Managing Entity (AME)* as described on page 1? | | | | | | | |
| No, complete Section 4. Yes, complete Section 4 and attach a completed AME Request Form to this application. | | | | | | | |
| 4.02 Has the applicant organisation completed and attached Form 2 - Forecast Housing Demand? *Form 2 - Forecast Housing Demand will be used to maintain an up-to-date forecast of all anticipated housing demand in Jabiru* | | | | | | | |
| No Yes | | | | | | | |
| 4.03 Complete the following table for all staffing requirements as follows:  1. Include any positions planned for recruitment in the next 12 months. This should be as outlined in your business plan  2. Include transit accommodation requirements  3. Complete each column as follows:  - Department: include the department, service category, etc the position is for  - Position: include each staff member’s position  - Start Date: nominate the preferred lease start date for.  - Duration: nominate the preferred lease duration for this position  - Dwelling type: nominate the type of dwelling preferred for this position  **- Direct: nominate any positions that require a PRIVATE TENANCY Direct with employee (i.e. housing not provided with employment)**  - Lot No.: if there is a preferred lot for a position please nominate the lot number. | | | | | | | |
| **#** | **Department** | **Position** | **Start Date** | **Duration** | **Dwelling Type** | **Direct** | **Lot No.** |
| 1 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 2 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 3 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 4 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 5 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 6 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 7 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 8 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 9 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 10 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 11 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 12 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 13 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 14 | *Type here* | *Type here* | *Type here* | *Type here* | *Choose an item.* |  | *Type* |
| 4.04 Provide any other information: | | | | | | | |
| Type here | | | | | | | |
| END OF SECTION 4 | | | | | | | |

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| **Date of Application:** | 2 June 2020 |

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| CHECKLIST OF ATTACHMENTS FOR THIS APPLICATION | | | |
| Please confirm all sections have been completed and all supporting documents are attached to this application: | | | |
| ARF SECTION 1: Applicant Details | | Completed | No, previously submitted |
| ARF SECTION 2: Applicants Business & Investment Interest | | Completed | No, previously submitted |
| ARF SECTION 3: Non-Residential Request (indicate how many) | | Completed, *Select* | No, previously submitted |
| ARF SECTION 2/3: Supporting documents (eg. Business Plan) | | Attached | Not Provided |
| ARF SECTION 4: Residential Request | | Completed | No, previously submitted |
| FORM 2: Forecast Housing Demand | | Attached | No, previously submitted |
| FORM 3: AME Request Form | Not Applicable | Attached | No, previously submitted |

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| AUTHORISATION |
| All applicants must sign and date the application form. Applicants must:   * Submit the original application in hard copy to the following address.   Shop 3 Jabiru Town Plaza  PO Box 82, Jabiru, NT, 0886 or;   * Submit an electronic application to [**operations@jabirukabolkmakmen.com.au**](mailto:admin@jabirukabolkmakmen.com.au)**.** You will receive an electronic confirmation within 48 hours of your application being received and read. Please contact [**operations@jabirukabolkmakmen.com.au**](mailto:admin@jabirukabolkmakmen.com.au)if you do not receive an acknowledgement within 7 days.   Would you like to receive correspondence via  Email  Letter  Both |
| * By signing this form, the applicant declares that the information provided in this application is true and correct. * Jabiru Kabolkmakmen Ltd may request the applicant to provide additional information to assess this application; failing to provide the requested information may hold up the assessment process. * The applicant accepts that the ARF application and business plan may be reviewed by a third party, and that Jabiru Kabolkmakmen may need to seek independent or expert advice in the process of assessing the proposal. |
| **PRIMARY CONTACT PERSON** (Person authorised to act on behalf of organisation regarding property matters)  Name: Type here  Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: *Type here* |
| END OF SECTION 5 |
| END OF FORM |