

# Bin Trim Equipment Rebates Program - Application Form 1

## Form Preview

### About the Bin Trim Equipment Rebates

\* indicates a required field

#### Instructions for Business Applicants

Before completing this application form, you should have read the **Bin Trim Equipment Rebates - Guidelines for applicants 2023** at <https://www.epa.nsw.gov.au/BinTrim-rebates>

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

**Equipment procured (purchased or leased) before the rebate is approved by the EPA will not be funded.**

#### Rebate Application Number

This field is read only.

#### Program Details

Bin Trim Equipment Rebates program provides up to \$50,000 to NSW businesses for up to 50 per cent of the cost of small-scale, on-site equipment or technology that helps them to avoid, reduce, reuse, or recycle their waste.

#### Grant Program Name

This field is read only.

The program this submission is in.

#### Disclaimer

The Business applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any project, and the EPA expressly reserves its right to accept or reject this application at its discretion
- it must bear the costs of preparing and submitting this application and the EPA does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected, and
- it has read the EPA Bin Trim Equipment Rebates Guidelines for applicants 2023 for the program and has fully informed itself of the relevant program requirements.

#### Use of Information

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By submitting this application form, the Business applicant acknowledges and agrees that:

- if this project application is successful, the relevant details of the project will be made public, including details such as the name of the organisation (Business applicant) and any partnering organisation (state government agency or non-government organisation), project title, project description, location, anticipated time for completion and amount awarded,
- the EPA will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-in-confidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the *Government Information (Public Access) Act 2009* (NSW) (GIPA Act), and
- in some circumstances the EPA may release information contained in this application form and other relevant information in relation to this application in response to a request lodged under the GIPA Act or otherwise as required or permitted by law.

## Privacy Notice

By submitting this Application form, the Business applicant acknowledges and agrees that:

- the EPA is required to comply with the *Privacy and Personal Information Protection Act 1998* (NSW) (the Privacy Act) and that any personal information (as defined by the Privacy Act) collected by the EPA in relation to the program will be handled in accordance with the Privacy Act and its [Privacy Management Plan](#),
- the information it provides to the EPA in connection with this application will be collected and stored on a database and will only be used for the purposes for which it was collected (including, where necessary, being disclosed to other Government agencies in connection with the assessment of the merits of an application) or as otherwise permitted by the Privacy Act, and
- it has taken steps to ensure that any person whose personal information (as defined by the Privacy Act) is included in this application has consented to the fact that the EPA and other Government agencies may be supplied with that personal information and has been made aware of the purposes for which it has been collected and may be used.

## Eligibility Confirmation

### Eligible applicants

Businesses applying for the Rebates Program must:

- have a commercial and industrial (C&I) waste service at a site in NSW
- have a valid ABN and employ one or more full time employees in NSW, and
- send C&I waste to landfill in NSW.

Businesses can include entities that are registered charities, not-for-profits, public entities (including schools and hospitals), and government organisations.

### Please declare this application meets the Program eligibility criteria:

- it has been prepared by and is being submitted by an eligible applicant,

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- the project application is specific to a site in NSW,
- within 3 months of executing a Funding Deed, applicant procures, installs and commences use of equipment or technology
- for 12 months from the date of installation (if leased) OR for 5 years from the date of installation (if purchased), the applicant operates and maintains the equipment or technology
- applicants will notify the EPA if rebate or grant funding is secured from another source

**I confirm that the Business applicant and project is eligible according to the criteria outlined in the Program Guidelines \***

Yes

## Contact Details

\* indicates a required field

## Organisation Details

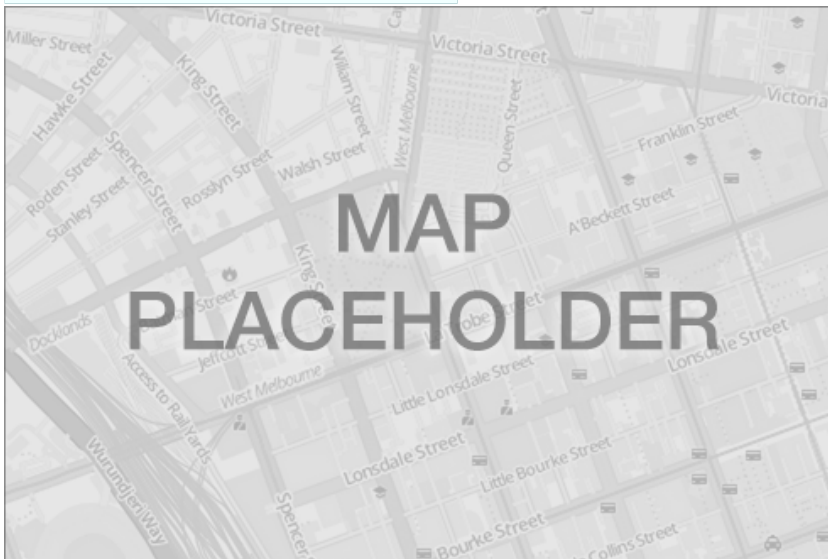
### Organisation Name \*

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

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### Postal Address

Address

### Primary Phone Number \*

Must be an Australian phone number.

Country code not required, area code for landlines is required.

### Other Phone Number

Must be an Australian phone number.

Country code not required, area code for landlines is required.

### Email Address \*

Must be an email address.

### Website

Must be a URL.

### Please detail the primary business activities of the applicant organisation. \*

List the type of business and what it does

### Does the applicant organisation have an Australian Business Number (ABN)? \*

Yes

No

### 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

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Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type [More information](#)

ACNC Registration

Tax Concessions

Main business location

Must be an ABN.

## Primary Contact Details

### Primary Contact \*

Title First Name Last Name

This is the person we will correspond with about this rebate.

### Primary Contact Position \*

e.g. General Manager

### Primary Contact Phone Number \*

Must be an Australian phone number.

Country code not required, area code for landlines is required.

### Primary Contact Other Phone Number

Must be an Australian phone number.

Country code not required, area code for landlines is required.

### Primary Contact Email \*

Must be an email address.

This is the address we will use to correspond with you about this rebate

## Bank Details

### Business applicant Bank Account \*

Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

### Bank name: \*

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Name of financial institution

**You must attach written confirmation of EFT payment details on business letterhead to receive rebate funding. \***

Attach a file:

This must include:

- Bank Name
- BSB No.
- Account No,
- Account Holder/Name

## Application Details

\* indicates a required field

This section is required by all NSW grant funding recipients.

For Bin Trim Equipment Rebates Program:

- **Title:** give your project a name
- **Brief description:** of equipment or technology being installed at your business and waste problem being addressed.
- **Anticipated start date** is anticipated date of equipment purchase or lease
- **Anticipated end date is** 5 years after equipment purchased OR a minimum 12 months after leased
- **Primary location of your initiative** is site of equipment installation

**Title \***

Word count:

Must be no more than 25 words.

Provide a name for your initiative. Your title should be short but descriptive.

**Brief description \***

Word count:

Must be no more than 50 words.

Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

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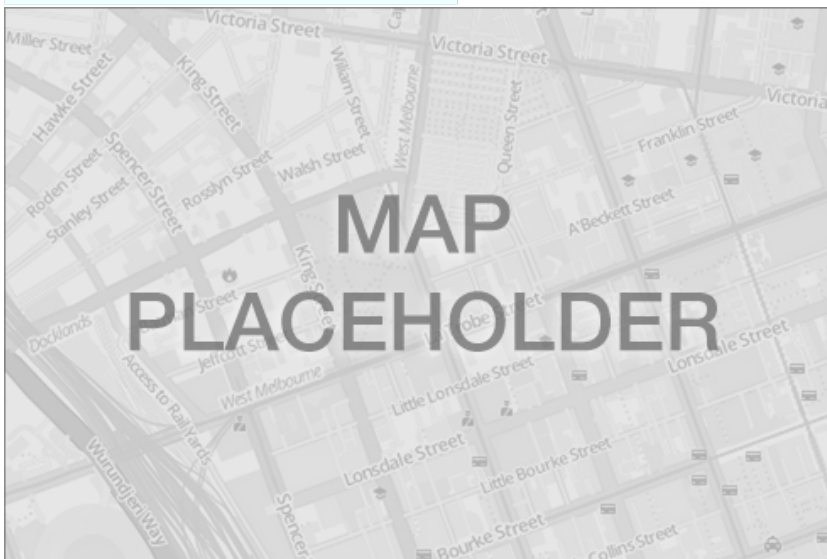
## Form Preview

**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.

## Waste materials to be handled by proposed equipment

\* indicates a required field

### Bin Trim assessment

An initial waste assessment using the [Bin Trim App](#) has been completed up to three months before submitting this application?

\*

by self assessment using the Bin Trim App  by a waste assessor using the Bin Trim App

### Waste assessor

**Waste Assessor Organisation Name \***

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Organisation Name

**Waste Assessor Name \***

**Waste Assessor Email \***

Must be an email address.

**Which waste material categories will be handled by the proposed equipment?**

**Waste material categories \***

Organics (food, garden, wood)       Plastic

Other (paper, cardboard, glass, all other)

Select one or more categories

### Organics & Wood - waste materials

List the materials to be handled by the proposed equipment and the waste avoidance and/or resource recovery (in tonnes per year) expected from using the equipment.

Waste material type	waste avoidance	resource recovery	waste reduction
As per waste and recycling action plan <a href="https://apps.epa.nsw.gov.au/bintrimapp">https://apps.epa.nsw.gov.au/bintrimapp</a>	Enter the amount of waste (tonnes per year) to be avoided or reduced	Enter the amount of waste (tonnes per year) to be recovered from your general waste stream for re-use or recycling	(waste avoidance + resource recovery)

### Plastic - waste materials

List the materials to be handled by the proposed equipment and the waste avoidance and/or resource recovery (in tonnes per year) expected from using the equipment.

Waste material type	waste avoidance	resource recovery	waste reduction
As per waste and recycling action plan <a href="https://apps.epa.nsw.gov.au/bintrimapp">https://apps.epa.nsw.gov.au/bintrimapp</a>	Enter the amount of waste (tonnes per year) to be avoided or reduced	Enter the amount of waste (tonnes per year) to be recovered from your general waste stream for re-use or recycling	(waste avoidance + resource recovery)



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### Other - waste materials

List the materials to be handled by the proposed equipment and the waste avoidance and/or resource recovery (in tonnes per year) expected from using the equipment.

Waste material type	waste avoidance	resource recovery	waste reduction
As per waste and recycling action plan <a href="https://apps.epa.nsw.gov.au/bintrimapp">https://apps.epa.nsw.gov.au/bintrimapp</a>	Enter the amount of waste (tonnes per year) to be avoided or reduced	Enter the amount of waste (tonnes per year) to be recovered from your general waste stream for re-use or recycling	(waste avoidance + resource recovery)

### Waste Reduction summary (tonnes per year)

#### Waste avoidance

Organics

Plastic

Other

Total

#### Resource recovery

Organics

Plastic

Other

Total

#### Waste reduction

Organics

Plastic

Other

Total

### Maximum potential rebate (\$) for waste reduction

### Action plan / quote for equipment

\* indicates a required field

### Budget - itemised equipment and technology quote (excluding GST)

Include all expenditure items (excluding GST) that you are seeking to fund under the rebate.

- List each item of equipment or technology on a new row.
- Excludes any installation, delivery, commissioning, labour or project management fees or surcharges etc

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Description of equipment item	Brand & model number	Quantity	Amount (ex. GST) per unit	Quote amount (ex. GST)	size or processing capacity of item
e.g. baler, granulator, shredder		Number of units.	amount (\$)		e.g. size of bin (L), size of bale (kg), processing capacity (kg/day)
				\$	
				\$	
				\$	
				\$	
				\$	

### Rebate quote

#### Total quote amount (ex. GST)

#### 1. Maximum potential rebate for waste reduction

#### 2. 50% of quote amount

#### Total amount requested must be the lesser of:

- 1. Maximum potential rebate for waste reduction
- 2. 50% of quote amount

#### Total Amount Requested

\*

What is the total financial support you are requesting under this grant?

#### Please attach genuine quote for all itemised equipment items listed above

Attach a file:

Please attach quote from each supplier

### Merit criteria

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\* indicates a required field

### Supporting information

**Please describe the equipment and/or technology and how it will be used to achieve the waste reduction you have estimated in this application? \***

**How will outputs from this equipment be further treated/processed/disposed? \***

**Is the site suitable for installation and commissioning? Have the necessary energy, water, space, ventilation requirements been considered by the applicant? \***

**What steps will be taken to ensure equipment is used safely and effectively? \***

**Summarise relevant Work Health and Safety, initial and on-going staff training/education and maintenance plans? \***

**How will this be monitored by management? \***

### Supporting Documentation

\* indicates a required field

#### Attachments

Please attach most recent waste bill(s) and other supporting documents to support your Rebate application.

**Waste bills \***

Attach a file:

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Copies of most recent waste bills for your site

### Other waste data (optional)

Attach a file:

Any other supporting documentation - e.g. waste data in Excel spreadsheets

## Declaration and Authorisation

\* indicates a required field

### Declaration

The Applicant represents and warrants that this application has been submitted by an authorised representative of the Applicant (e.g. CEO, Chief Financial Officer, General Manager, Director, Chair of the Board, President, authorised manager etc).

Where this Application is submitted in the course of employment by a representative of any kind (e.g. authorised representative or agent) of the Applicant, you:

- (i) acknowledge and agree that the Applicant is deemed to be jointly and separately bound by this application, and
- (ii) represent and warrant that you have the authority to represent and bind the Applicant as contemplated by this provision.

By submitting this application form I hereby declare that:

- I agree for my project to be automatically considered in other NSW funding programs
- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application
- I am authorised to submit this application on behalf of, and have the authority to represent and bind, the Applicant
- I understand that any false declaration may render this application ineligible/invalid
- All relevant conflicts of interest have been declared

### Authorisation

I agree \*

Yes

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**Name of authorised person \***

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be a senior staff member, board member or appropriately authorised volunteer

**Position \***

Position held in applicant organisation (e.g. CEO, Treasurer)

**Phone number \***

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

**Email \***

Must be an email address.

## Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

**How did you find the online application process?**

- Very easy       Easy       Neutral       Difficult       Very difficult

**How many minutes in total did it take you to complete this application?**

Estimate in minutes i.e. 1 hour 60

**Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.**