

Local Government Waste Solutions Round 3

Form Preview

About the Grant

* indicates a required field

Instructions for applicants

Before completing this application form, please read the program guidelines available on the [EPA Local Government Waste Solutions webpage](#)

Application Number

This field is read only.

Program Details

The Local Government Waste Solutions Fund will encourage the transition to a Circular Economy and aims to:

- support NSW local councils, collaborations of councils, and regional waste groups in the levy paying areas to deliver innovative waste and recycling solutions to their communities that support transition towards a circular economy and contribute to achieving NSW Government's waste priorities and targets
- facilitate collaboration, knowledge-sharing and partnerships to assist NSW local councils to transition to a circular economy and have long-term impacts
- support local councils to share the findings and resources of funded projects.

Disclaimer

The Applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any project, and the Department 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 Department does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- it has read the [Funding Guidelines](#) for the Program and has fully informed itself of the relevant program requirements.

Use of Information

Local Government Waste Solutions Round 3

Form Preview

By submitting this application form, the 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 names of the organisation (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 Department 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 Department 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 Applicant acknowledges and agrees that:

- the Department 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 Department in relation to the program will be handled in accordance with the Privacy Act and its privacy policy (available at: <https://www.dpc.nsw.gov.au/privacy>);
- the information it provides to the Department 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;
- 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 Department 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

Please declare this application meets the program eligibility criteria:

- It has been prepared by and is being submitted by an eligible applicant
- Proposed projects must contribute to achieving at least one of the priorities and targets identified in the [WaSM strategy](#) and the [NSW Plastics Action Plan](#)
- Projects must be completed by end June 2027
- Applicants will notify the Department if grant funding is secured from another source

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

☐ Yes

Local Government Waste Solutions Round 3

Form Preview

Contact Details

* indicates a required field

Applicant Details

Applicant *

☐ Individual ☐ Organisation

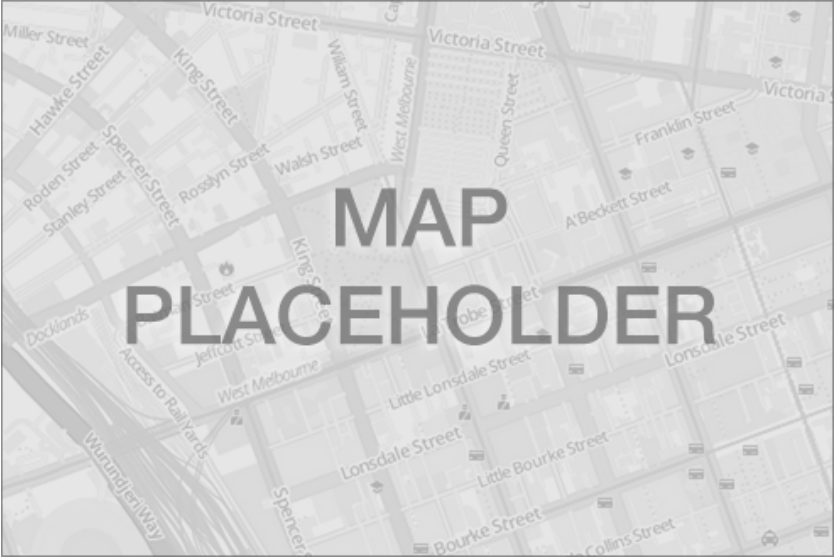
Organisation Name

Title First Name Last Name

For organisations: please use the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

Applicant Primary Address

Address



Applicant Postal Address

Address

Applicant Primary Phone Number *

Local Government Waste Solutions Round 3

Form Preview

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Applicant Email Address *

Must be an email address.

Applicant Website

Must be a URL.

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

☐ Yes ☐ No

Applicant Organisation 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	
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
<input type="text"/>	<input type="text"/>	<input type="text"/>

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

Primary Contact Position *

e.g., Manager, Board Member or Fundraising Coordinator.

Local Government Waste Solutions Round 3

Form Preview

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 *

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

Secondary Contact

*

Title

First Name

Last Name

Organisation *

Position *

Phone Number *

Must be an Australian phone number.

Email *

Must be an email address.

Project Outline

* indicates a required field

Is this an individual or joint project? (select one) *

- ☐ Individual project - undertaken by a single local council
- ☐ Joint - undertaken by a regional waste group or group of councils

Name of organisation leading project *

Local Government Waste Solutions Round 3

Form Preview

Please list all councils participating in the project *

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.

Anticipated start date *

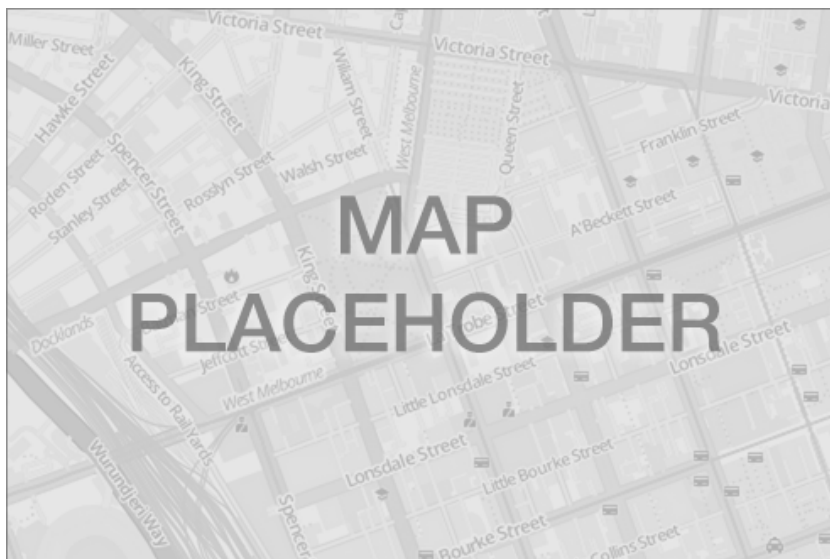
Anticipated end date *

Primary location of your initiative

Address

Local Government Waste Solutions Round 3

Form Preview



Any, but at least one field is required.

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 end date

You have indicated above that your project would be completed after 30/06/2027, exceeding the timeframe for delivery under this Program. Please update the details to ensure your dates fit within the timeframe.

Project Overview

What is the problem your project is trying to address? *

Word count:

Must be no more than 400 words.

Describe any evidence/ data/research that defines the problem and your organisation's current approach

Provide an overview of your project and how it addresses the problem *

Word count:

Must be no more than 300 words.

Include the main activities and objectives for your project.

Strategic and Community Support

Local Government Waste Solutions Round 3

Form Preview

Does your project link to any existing strategic planning document, policies or priorities within your organisation?

☐ Yes ☐ No

Does your project have community support?

☐ Yes ☐ No

This may include but is not limited to social research, surveys, consultation

Please provide explanation or evidence of your answers above, if available.

Word count:

Must be no more than 200 words.

If you believe there is community support but this has not yet been confirmed, please detail your rationale.

Please upload documentation (if relevant or available)

Attach a file:

A maximum of 10 files may be attached.

Any additional or supporting material must be relevant and succinct.

Project Details

* indicates a required field

Project Implementation

Please detail the stages or activities expected to be completed as part of the project, to the best of your knowledge. Each key activity should be listed as a separate row.

Activity details	Outputs or deliverables	Desired results	Who is involved	Estimated timing
Include the activity name and short description	E.g. report produced, recommendations documented, waste flows mapped, workshops held	E.g. materials of interest prioritised, project can proceed to a next phase, budget can be allocated, approval can be sought		

Innovation

For the purposes of this Fund, 'innovation' is defined as the practical application of ideas that result in something that is new, unique or adds value to an existing solution that is scalable.

Local Government Waste Solutions Round 3

Form Preview

How is your project innovative? *

Word count:

Must be no more than 300 words.

What has been done in the past to address this problem? How does your approach differ or add value to what is currently done?

Collaboration

Briefly outline who your organisation intends to collaborate with to design or deliver your project. Please indicate internal teams, other councils or waste groups, businesses, contractors, social enterprises, community groups, or other networks that you expect will be involved, as well as the role they will play in the project.

Please add a new row per partner.

Partner organisation	Partner's role

Building Capacity

How will your project build capacity for the transition to a Circular Economy?

Word count:

Must be no more than 300 words.

Consider the development of skills and competencies, changes in attitudes, establishment of policies or processes, access to resources or networks.

How will you share project outcomes and lessons with others?

Word count:

Must be no more than 300 words.

Note: a case study is required as part of the project final report

Project Impact - NSW Outcomes

The Local Government Waste Solutions Fund supports waste and recycling initiatives that contribute to achieving the priorities and targets identified in the [NSW Waste and Sustainable Materials Strategy 2041](#) and the [NSW Plastics Action Plan](#).

Outline how your project aligns with these priorities and/or targets.

NSW Government Target	How does your project align with this target?	How will you measure this has been achieved?
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Local Government Waste Solutions Round 3

Form Preview

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Project Impact - Project specific outcomes

Indicate the key result(s) you expect to achieve by delivering your project and describe how you will monitor and evaluate progress towards achieving this result

Note the information provided in this question is for the project as a whole rather than individual activities.

Add as many rows as necessary.

Project outcome	Performance indicator(s)	How will you monitor these indicator(s) during the project?
	What indicators are relevant to the outcome? Qualitative and quantitative measures may be relevant.	How often will you gather and evaluate data and from what sources? Do you have a baseline?

Project Impact - Scalability

How could your project be scaled? *

Word count:

Must be no more than 300 words.

Scalability: the extent to which the project is of interest or value to other councils, localities and communities; the extent to which the project can be replicated, expanded or scaled up in the future

Project Impact - Longevity

How will your project benefits be sustained over the long term? *

Word count:

Must be no more than 300 words.

Budget

* indicates a required field

Total Project Cost *

What is the total budgeted cost (dollars) of your project?

Local Government Waste Solutions Round 3

Form Preview

Total Amount Requested

*

\$

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

Please update your response to the Total Amount Request question above

You have requested more than the amount of funding available for regional waste group or a collaboration of local councils.

A project delivered by a regional waste group or a collaboration of local councils has a maximum funding limit of \$400,000 (excluding GST). A project must involve at least two local councils from the levy-paying area to be eligible for the maximum funding limit of \$400,000 (excluding GST).

Please update your response to the Total Amount Request question above

You have requested more than the amount of funding available for an individual council. A project delivered by an individual council has a maximum funding limit of \$200,000 (excluding GST).

Project Budget

Please include all activities that are budgeted under the project.

Please note, LGWS funded items must be eligible under the grant as according to the [guidelines](#).

Budget item	LGWS Grant funds	In-kind contributions	Other funding	Notes
	\$	\$	\$	
	\$	\$	\$	
	\$	\$	\$	
	Must be a dollar amount.	Must be a dollar amount.	Must be a dollar amount.	

Risk Management

Risk Management

Outline at least three risks that could impact your ability to deliver the project and explain how you will reduce or manage each of them.

Add a new row for each risk identified.

Risk description	Risk level	Risk mitigation plan
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Local Government Waste Solutions Round 3

Form Preview

Supporting Documentation

Any additional or supporting material submitted with your application must be relevant and succinct. Only submit essential supporting information such as: • Strategy, policy, plan or report references (if not already uploaded) • Letters of support from collaborators (maximum two pages)

Describe the document and its relevance **File Upload** **to your application**

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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 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; and
- All relevant conflicts of interest have been declared

Local Government Waste Solutions Round 3

Form Preview

Authorisation

I agree *

☐ Yes

Name of authorised person *

Title First Name Last Name

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. Feedback is optional and will not impact your application. If you would like to submit now and share your feedback later, please email us at localgovernment.programs@epa.nsw.gov.au

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.