About the grant

Introduction

In June 2021, the Minister for Energy and Environment released the Waste and Sustainable Materials Strategy 2041 - Stage 1: 2021-2027 and the NSW Plastics Action Plan. The Waste and Sustainable Materials Strategy (WaSM) aims to change how the NSW economy produces, consumes, and recycles products and materials, and sets out a vision for transitioning to a circular economy over the next 20 years.

The Net Zero Organics Business Food Waste Partnerships program has been designed to help meet WaSM targets and support the transition to a circular economy. The program will fund industry peak bodies, councils, sector leaders and businesses that have proven records in supporting and educating their members or the Commercial & Industrial (C&I) sector through their established channels, and programs.

Through the program, grant funds will support successful applicants to raise food waste awareness and equip their members or the C&I sector to minimise food waste generation and implement food waste source separation in their operation.

Instructions for Applicants

Before completing this application form, you should have read the Organics Business Food Waste Partnerships Grant Program Guidelines.

Incomplete applications and/or applications received after the closing date will not be considered. It is recommended that you complete the eligibility section before any other sections to ensure you are eligible for this grant stream prior to completing an application.

If you have any questions about the elgibility criteria, the application form, or the grant program, please contact recycling@epa.nsw.gov.au or call 131 555.

If you do contact us throughout the application process, please quote the application number which is provided to you when you start an application.

Application Number

This field is read only.

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

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 requirements

To be eligible for funding under the Business Food Waste Partnerships Grants Program, applicants must demonstrate a capacity to manage the grant funds, must hold an Australian Business Number (ABN) or Australian Company Number (ACN) , and must meet the eligibility criteria below.

Please ensure that you read the Guidelines to fully understand eligible applicants, projects and outcomes.

You must meet at least one of the eligibility criteria listed below

Do you meet the eligibility criteria listed below (at least 1 choice must be selected) *
☐   An industry association or peak body that has an established network or ongoing programs to support NSW members and businesses
☐   A council that has an established network or ongoing programs to support local businesses
☐   An institution or organisation that has an established network or ongoing programs to support their target audience's business operation or their sustainability targets
☐   Waste collection company that provides food waste collection and ongoing education support to NSW businesses and its members

Has the project secured funding from other funding agencies for the same activities proposed in this application? *
○   Yes
○   No
If you answer yes to this question your project is not eligible for funding

Not eligible

Unfortunately, your application is not eligible as it doesn't meet the eligibility requirements.

Compliance

In the last five years have you or any project partner or contractor received any penalty notices, cleanup notices, prevention notices, licence suspensions, licence revocations, convictions or prosecutions under the NSW environment protection laws including National Parks and Wildlife Act 1974, Protection of the Environment Operations Act 2014 (POEO Act) and the Native Vegetation Act 2003? *
○   Yes
○   No
If you answered yes to the above, please provide details, including any improved processes implemented to correct these breaches.

Since 1 July 2017, have you or any project partner or contractor contravened any provision of the POEO Act with the result of avoiding, minimising or undermining the requirement to pay any waste contributions required under Section 88 of the Act? *

○ Yes
○ No

If you answer yes to the above, your organisation may not be eligible for funding and you must contact the NSW EPA to discuss your eligibility before proceeding.

You answered yes to the above question, please provide details on the breach and include any improved processes implemented to correct these breaches. *

Confirmation of compliance and eligibility

I confirm that:

- I have read the Business Partnership Program Guidelines
- The organisation I represent is eligible (as per the previous sections)

I also confirm that the proposed project will:

- Contribute to the objectives and targets of the WaSM Strategy and/or the Net Zero Plan and/or Waste Delivery Plan
- Support circular economy and waste solutions in a targeted network
- Utilise existing network and programs to raise food waste awareness and capacity building to support target audiences to reduce and source separate food waste
- Result in avoidance, reuse or recycling of food waste generated by the C&I sector in NSW
- Engage a significant number of members or large food waste generating businesses in NSW
- Have project operations in NSW to provide economic benefits in NSW
- Integrate effective and transparent monitoring and review processes
- Have confirmed project partners (if applicable) with evidence of support
- Ensure that new resources developed include acknowledgement of EPA funding, meet requirements of the EPA style guide, and are approved by the EPA
- Integrate the new project, service, or activity into existing networks or programs with the intention of ensuring longevity after the funding is exhausted
- Promote an ethical use of public resources and achieve value for money.

Do you confirm the above? *

○ Yes
○ No

Not eligible

Contact Details - Lead Applicant

*indicates a required field

Primary Contact Details

Primary Contact *

Title   First Name   Last Name

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

Primary Contact Position *

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

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.

Applicant Details

Applicant *

○ Individual   ○ Organisation
Organisation Name

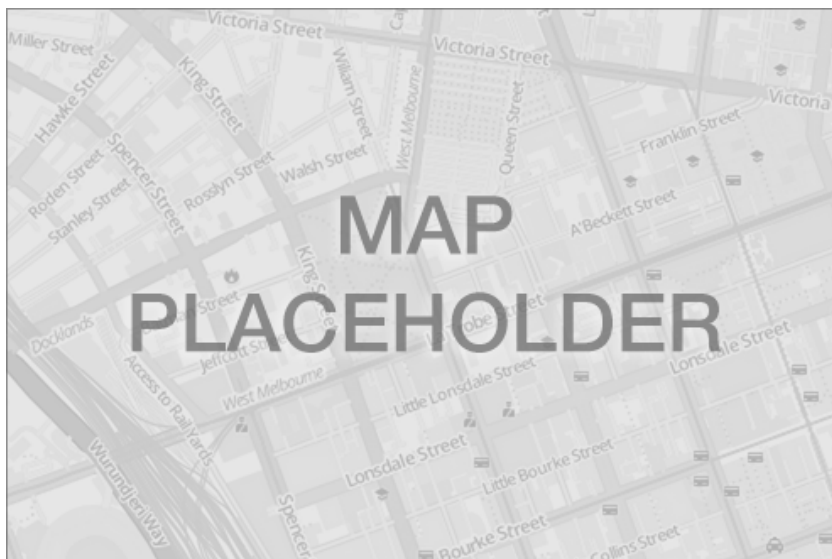Title   First Name   Last Name

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 *

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.

Project partner or contractor details

Please provide details of all project partners and contractors here, including a description of their role in the project.

Will you be working with project partners and/or contractors *
○ Yes
○ No

Project partner or contractor details

Please provide details of all project partners and contractors here, including a description of their role in the project.

Partner ABN or Contractor	Partner/Contractor role and any additional information	Main business location (City/town)	Best contact number	Email address	Partner/Contractor Website	Partner/Contractor Address	Project partner or contractor role and any additional information	Letter of support or other partnership/contractor evidence
	Must be a number, https://abr.business.gov.au/ Must be a number.		Must be a number.				Use this section to detail the partner/contractor role in the project and their relevant experience/connection and what they add to the project	Please upload a letter of support or other evidence/verification from this project partner or contractor.

Project Parter or Contractor role

Use this section to detail the partner/contractor role in the project and their relevant experience, connections and what they add *

Organisation Details

* indicates a required field

Applicant Organisation Details

Please detail the primary activities of the applicant organisation. *

Word count:
Must be no more than 200 words.

Does the applicant organisation have at least $20 million in public liability insurance, or is willing to obtain $20 million in public liability insurance? *
○   Yes
○   No, but willing to obtain
Applicants are required to hold at least $20 million public liability insurance in order to enter into a funding deed with the NSW Government.

Please provide evidence that the applicant organisation holds Public Liability Insurance. *
Attach a file:

Applicants are required to hold at least $20 million public liability insurance in order to enter into a funding deed with the NSW Government.

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.

Applicant Organisation ACN *

Project

* indicates a required field

Eligible outcomes

Which of the following eligible outcomes will the project contribute to? *
☐ Reduce total waste generated by 10% per person by 2023
☐ 80% average resource recovery rate from all waste streams by 2030
☐ Halve the amount of organic waste sent to landfill by 2030
At least 1 choice must be selected.
Atleast 1 choice must be selected

Priority outcomes

For the Business Food Waste Partnerships Grants Program Round 1 in 2023/24, priority will be given to projects that contribute to the priority outcomes below. Projects which do not address the priority outcomes are still eligible to apply if they meet other eligibility criteria and contribute to the eligible outcomes.

Which of the following priority outcomes will the project contribute to? *
☐ Supporting retail, or hospitality or institution sectors to source separate their food waste
☐ Supporting the transition to food waste recycling
☐ Supporting food waste avoidance actions including donating food to local charities
☐ Raising awareness of the environmental, social, and economic impacts of food waste
☐ None of the above
At least 1 choice must be selected.

Not eligible

Project Information

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 *
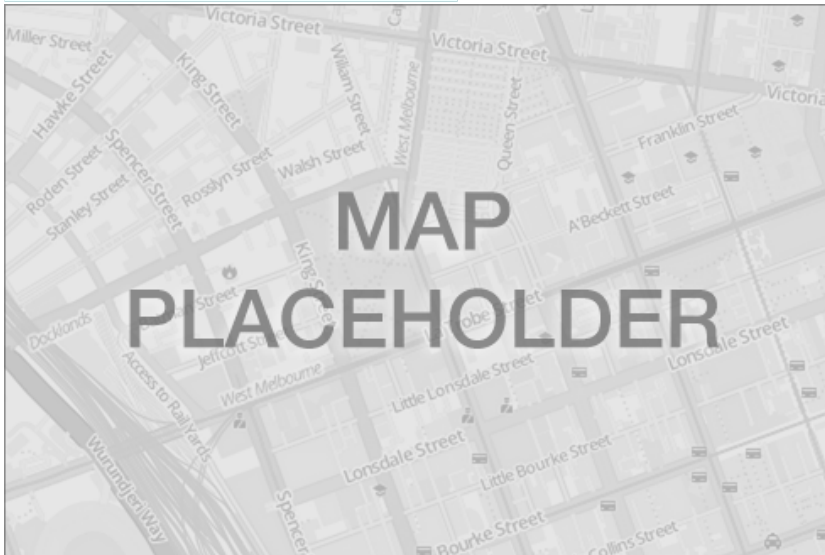
Word count:
Must be no more than 50 words.

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

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.

Re-fill date, project must be completed by May 2027

What is your Business Food Waste Partnerships Grants project? Please outline the project objectives, target audiences, project duration and expected outcomes. *

What existing channels or programs do you intend to use for this project delivery? Please describe the existing channels or programs that you and/or

project partners have used to engage the target auditence and engagement data.
*

How does this project align with your organisational values or sustainability targets? *

How will you engage with relevant businesses to participate in the network and maintain their involvement through the project period to ensure the desired behaviours are maintained? *

Key Project Personnel

Please provide information on the key personnel who will be responsible for the delivery of the project, including their qualifications and experience of similar types of projects delivered and the results.

Please include only one person per row. Add more rows if you want to list additional personnel.

Name	Organisation	Role	Experience	CV/ Supporting document	Notes
One per row. Add more rows if you want to list additional key project personnel.				Please provide a CV or any supporting documentation, where relevant.	Please provide any further details.

Project Focus

Who are your target audiences? *

Do you intend to support the target audience continuously to reduce and source separate food waste once the grant project is completed? *

How is your project outcomes contributing directly to achieving the NSW organics targets which are: halving organics waste sent to landfill by 2030, an 80% average recovery rate from all waste streams by 2030 and net zero emissions from organics waste from 2030. *

Project Milestones and Key Deliverables

Please detail the administrative stages or activities expected to be completed as part of the project.

Milestone and Deliverables	Expected start date	Expected end date	Explanatory notes
Please provide detail for one Milestone per row. e.g., Planning; recruitment; evaluation. Add more rows if you want to list additional milestones. Please include detail of all Deliverables that are part of the Milestone.	Must be a date.	Must be a date.	Add notes if you need to provide more context.

Monitoring and Evaluation

Your metrics

You may add your own metrics here.

Metrics work best when they:

- Are quantifiable/numeric
- Are clearly defined and succinct
- Contain all the context needed to gauge and compare the result (e.g. unit [e.g. cm, metres, people, people-days, %, etc]; direction of change [increase; decrease; etc.]; timeframe [e.g. per month; per year; etc])
- Have been tested, and/or are in common use, and/or are commonly understood as a relevant and useful indicator of performance in a particular arena
- Are used sparingly - you are much better off to ""ask one good question and answer it reliably"" than try to track many things at once
- Relate to a clearly articulated outcome or activity.

Metric	Target	Collection method	Explanatory notes
One per row. Add more rows if you want to list additional metrics.	Identify a target for the metric you have chosen - an estimated total for your project. Must be a number.	How will you collect and verify the data? E.g. survey, interviews/case studies, focus groups, administrative data (e.g. case management data),	Add notes if you need to provide more context.

		observation/estimation, government or public dataset (e.g. Census), other datasets.	

Qualitative evidence

Qualitative evidence is a descriptive rather than numeric form of evidence designed to indicate whether or not progress towards an outcome is occurring.

Examples of qualitative data sources include interviews, testimonials, focus group transcripts/summaries, social media posts, media appearances/mentions, and artistic or multimedia depictions such as photographs, videos and audio/podcasts.

Qualitative evidence	Explanatory notes
Select the type of qualitative evidence you will use to help track your progress. One per row. Add more rows if you want to list additional types of qualitative evidence.	Add notes if you need to provide more context.

Outcomes

* indicates a required field

Project Outputs

What tools, resources, events, and training will be developed and delivered? Please note: resources developed for the grant project must be made available for the EPA to publish and make available state wide. *

Outcomes

Please tell us about the outcomes you expect to result from your project. Outcomes are the changes you expect to occur for the beneficiaries (direct, indirect and/or intermediaries) of your project. Generally, outcomes can be framed as an increase or decrease in one or more of the following:

- Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)
- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

Your outcomes	How does your intended outcome link to the Program outcomes?	Explanatory notes

What changes do you expect will occur as a result of your project (e.g. Enhanced physical fitness)? Please be brief. One per row.	Please explain how your intended outcome helps contribute to the Program Outcomes.	Add notes if you need to provide more context.

Risks and Dependencies

Please detail any risks or uncertainties in the delivery of the project, and how each of these will be managed.

Please include only one risk or dependency per row. Add more rows if you want to list additional risks or dependencies.

Risk or dependency description	How the risk or dependency will be managed
For example, you may require approval, have stretched resources, or time constraints for delivery.	You should provide an explanation of how you will prevent or treat the risk or dependency.

Budget

* indicates a required field

Total Project Cost *

$

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

Total Amount Requested *

$

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

Re-fill - amount requested is limited to $200,000 (excl GST)

Total Applicant Co-contribution *

$

Must be a dollar amount.
What is the total monetary amount the applicant will be contributing to the project?

Co-contribution %

This number/amount is calculated.
Percentage applicant contribution to Total Amount Requested.

Applicant In-kind Contribution *

Please detail any in-kind contributions the applicant will be making to the project.

Income

Please outline details of any other funding that you are seeking as part of the project, whether it has been confirmed or not. All amounts should be GST inclusive.

Please note, do not include the amount requested under this grant.

Income description	Income type	Income status	Income amount	Notes
			$	
			Must be a dollar amount.	

Expenditure

Please include all expenditure items (including the amount requested and any GST attracted) that you are seeking to fund under the grant.

Please note, these items must be eligible under the grant as according to the guidelines.

Expenditure description	Expenditure type	Expenditure amount (ex. GST)	Expenditure GST	Expenditure amount (inc. GST)	Notes
		$	$	$	
		Must be a dollar amount.	Must be a dollar amount.	This number/ amount is calculated.	

Other Inputs

Please detail any other, non-financial inputs that you will require in order to deliver the project, including the confirmation status of the input.

Input description	Input status
Non-financial inputs could include staff/volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, and other types of support.	

Supporting Documentation

Please provide supporting documentation from the key project partners/contractors you will be working with.

Please attach other critical supporting documentation, if you haven't already.
Attach a file:

A maximum of 3 files may be attached.

Declaration and Authorisation

* indicates a required field

Declaration

Conflict of Interest

Do you have any actual, potential or perceived conflicts of interest to declare? *
○ Yes
○ No

If yes, please explain your conflict of interest *

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; and
- All relevant conflicts of interest have been declared

Authorisation

I agree *   ☐   Yes

Name of authorised   Title   First Name   Last Name
person *

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 minutes

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