APPLICATION FORM

You must complete every item on the application form. If there are items you don't understand, or if you want any help with the form, contact the Local Government Grants officer at the TAC on (03) 5225 7639.

**Please note the TAC will only accept one submission per category (strategy and/or infrastructure) per council.**

When complete, you must send your original application form (including any supporting documentation such as photos, detailed costings and designs) and one additional copy (2 hard copies in total) of all documents to the following address to arrive by 4.00pm on the closing date.

**By POST:**

Transport Accident Commission Local Government Grants Program Road Safety

PO Box 742

GEELONG VIC 3220

**By COURIER:**

Transport Accident Commission Local Government Grants Program Road Safety

60 Brougham Street

GEELONG VIC 3220

An electronic version of your documents must also be provided by **4:00pm on the closing date** to: [lgagrants@tac.vic.gov.au](mailto:lgagrants@tac.vic.gov.au). No late submissions will be accepted.

**Applicant details**

Provide the following information about your organisation and your role. There is also space where someone in your organisation with the authority to approve the application should sign the form.

Name of LGA:

ABN:

Address:

Direct Telephone:

**Project summary**

Project name: Start date: End date: Level of funding sought from the TAC: Level of funding to be provided by LGA:

**Key Personnel\***

The contact person who is responsible for the project:   
 Name: Role or position: Direct Telephone: Email: Signature: Date: \*Should the key contact leave the project, the organisation must notify the TAC with the details of the new key contact.

**Authorised representative**

The person who has the legal authority to sign an agreement:

Name: Position: Signature: Date:

**Partner Organisation(s) details (if applicable):**

Organisation Name: Contact name: Position: Signature: Date:

**Project Details**

The project is directed at the safety of

1. Pedestrians
2. Cyclists

c) Both

**The project is directed at a solution which is:**

1. Area-wide
2. Route-based
3. Location-specific
4. Project development based

**Is this project:**

* + A proven treatment?
  + An innovative measure?

**Please describe your road safety project in a few sentences.**

**Road safety issue**

Describe the specific road safety issue you want to address. You should try to include information about the problem (e.g. risky behaviours, large numbers of pedestrians and/or cyclists exposed to risk, community concerns and, if available, supporting statistical data) and what you think is causing the problem.

**Road Safety Objectives, Activities and Deliverables**

Describe your project’s road safety objectives and proposed activities. The OBJECTIVES are the behaviours among road users that you are seeking to change in order to improve pedestrian and/or cyclist safety. The ACTIVITIES are the things you plan to do to achieve your objectives. You can have more than one objective, and you will almost certainly have more than one activity. The DELIVERABLES define the scope of the project and how you will facilitate measurement of project completion.

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| --- |
| **OBJECTIVES** |
| **ACTIVITIES** |
| **DELIVERABLES** |

**Rationale for your project**

Describe why you expect your project activities will help you achieve your objectives. Are there any general principles or research that supports this approach? Please describe.

**Evaluating your project’s success**

Has this approach been used with success elsewhere? If so, please elaborate. Otherwise, if the project is innovative in nature, please describe what you plan to do to collect information and evaluate your project to help ensure it meets its objectives. It is acknowledged that for some types of projects, outcome measures may be impractical and therefore intermediate measures, such as changes in speed behaviour or the levels of interaction between pedestrians and motor vehicles, may prove more helpful. All treatments require evaluation to assess the situation-specific success of the treatment.

**Project plan and timeline**

For each of the activities you listed above, describe the things you need to do to conduct each activity including assessment,and provide a timeline that shows when you expect to finish each of these tasks. Try to give as much detail as practical to allow an adequate assessment. NOTE: Application for an extension to a proposed project plan timeline must be completed on the Project Extension Request Form and approved by the TAC.

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| **Activity** | **Tasks** | **Start Date** | **Expected Completion Date** |
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**Risks**

Please identify potential or actual risks that may affect the success of your project. This is an important aspect of all projects and will help you plan to manage those risks. For each risk, please explain how you will either mitigate or eliminate the risk.

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| **Project Delivery Risks** | **Proposed actions to mitigate risk/s** |
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| **Situation-pecific Risks** | **Proposed actions to mitigate risk/s** |
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| **Treatment Specific Risks** | **Proposed actions to mitigate risk/s** |
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**Maintenance and Sustainability**

Describe how you think the project could continue after the TAC's funding period is complete, e.g. maintenance of new treatments, complementary programs and activities.

In the case of applications for project development activities, will funds be available to implement the project recommendations?

**Budget and funding request**

Describe your project’s **budget in detail** and include, where appropriate, details of funds to be provided by local government and/or project partners.

If successful, the grant will constitute an increase in local government investment rather than substitution of current funding levels.

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| **Project costs** | **Item** | **GST** | **Cost** |
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|  | **TOTAL COST** | **$** | **$** |
| **Other funding**  (including in-kind) |  |  |  |
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|  | **TOTAL FUNDING FROM OTHER SOURCES** | **$** |  |
|  |  |  |  |
| **REQUEST** | **FUNDING REQUESTED FROM TAC** | **$** |  |

**Background intellectual property**

Provide a description of all background intellectual property required for the project, including details of any third party rights to which the background intellectual property is subject. ‘Background intellectual property’ means any intellectual property (e.g. copyright, patents, designs, trade marks) created by a party independently of the project. It may include, for example, a trade mark of a project partner. You should also provide details of any agreement regarding your use of any background intellectual property.   
 **Insurances**

Provide information about insurance policies held by your organisation and those that you will need to obtain that are relevant to your proposed project e.g. public risk insurance, comprehensive motor vehicle insurance, workers compensation insurance, etc. If your application is successful, you will need to demonstrate appropriate insurance cover.

**Other information**

Please note that should your application be successful in securing grant funding from the TAC, you will be required to enter into an agreement which will entail the following obligations:

* + A six monthly progress report;
  + A final report one month after completion of the project, including before and after photos if appropriate;
  + Where applicable, an evaluation report of the innovative treatment, within 13 months of project completion, including before and after photos if appropriate and GPS coordinates of the location/treatment site;
  + Notify in writing the TAC project co-ordinator seeking approval for any variation in the proposed project, prior to the changes being implemented;
  + Agreement to your project being ‘showcased’ to other LGAs where the TAC deems appropriate; and
  + Signature of an authorised representative of successful LGA.