

# BETTER BOATING PROGRAM GRANT APPLICATION FORM



## Application for financial assistance for the provision of waterway infrastructure on New South Wales waterways.

Name of Organisation: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: \_\_\_\_\_

Date of Closing Period: \_\_\_\_\_

Office Use Only

BBP YEAR: \_\_\_\_\_

REGION: \_\_\_\_\_

PROJECT NAME: \_\_\_\_\_

DATE RECEIVED: \_\_\_\_\_



**Maritime**

# Grant Application Form

## Important

Before completing this application form you should read the detailed requirements in the Information Kit, which can be found at [www.maritime.nsw.gov.au](http://www.maritime.nsw.gov.au)

## PROJECT FUNDING

Under which Category are you applying for funding? **(Tick appropriate box)**

- Regional Infrastructure Grants
- SSHAP (Sharing Sydney Harbour Access Program)
- Sydney Harbour Boat Ramps

## Making a valid application

To make a valid application you must:

- use the form provided
- make sure you have all the attachments
- lodge your application by the closing date – late applications may not be accepted
- for a late application to be considered you must advise the Infrastructure Grants Manager in writing (or email) including details and cost of the project proposal prior to the closing date.

## Submission of Application

Applications may be submitted by email (5MB or less) or original hard copy.  
Email submission to [grants@maritime.nsw.gov.au](mailto:grants@maritime.nsw.gov.au)

Hard copy submission to           Infrastructure Grants Manager  
  NSW Maritime  
  Locked Bag 5100  
  CAMPERDOWN 1450

## Contact details for assistance

Applicants requiring further information or assistance should contact the NSW Maritime Infrastructure Grants Manager on 02 9563 8748 or at [grants@maritime.nsw.gov.au](mailto:grants@maritime.nsw.gov.au)

Applicants may also wish to contact their NSW Maritime Regional Manager to discuss potential projects at a local level.

- Hawkesbury/Broken Bay           02 9477 6600
- North Coast                         02 6691 9555
- Hunter/Inland                     02 4962 8555
- South Coast                        02 4274 7914
- Murray/Inland                    02 6021 7188

## Section A

### APPLICANT ORGANISATION DETAILS

Name of Organisation submitting Application

---

ABN

---

Is your organisation registered for GST?  Yes  No

---

Type of Organisation (Applicant) (tick as applicable)

- Local Government Authority
- Trust  Incorporated club or association  State/Federal agency
- Other, please specify:
- 

Applicant's Postal Address

---

Street/PO Box

---

Town/Suburb

---

Postcode

---

Applicant's Contact Person Mr/Mrs/Ms/Other Surname

---

First Name

---

Position Held Within Organisation

---

Contact Details

Business Phone/Mobile

---

Email

---

Show evidence that the applicant's organisation is a legally constituted entity or provide evidence to show there is currently a process of incorporation underway.

**Include the certificate of corporation as an attachment.** (not required for government authority)



Give a brief history of the applicant's organisation. (not required for government authority)

---

---

---

---

---

---

---

## Section B

### MANAGEMENT OF THE PROJECT

Name of the Project Manager (organisation) \_\_\_\_\_

Date of Incorporation:     /     /

ACN No: \_\_\_\_\_

Type of Organisation (Project Manager) (tick as applicable) \_\_\_\_\_

Local Government Authority

Trust    Incorporated club or association    State/Federal agency

Other

If other, please specify: \_\_\_\_\_

### Detail of Current Professional Indemnity

Insurer: \_\_\_\_\_

Insurance held by the Project Manager Sum Insured: \$ \_\_\_\_\_

Excess: \$ \_\_\_\_\_

### Level of Quality Assurance

Certification held by the Project Manager \_\_\_\_\_

Briefly describe the relevant experience/expertise of the Project Manager

---

---

---

---

---

---

---

---

---

---

## Section C

### PROJECT DETAILS

**Project Name** *(six words or less)*



**Project Location** - **Include a map as an attachment.**

**Location** eg; Reserve/Park/Facility Name

**Street Address** *(six words or less)*

**Town/Suburb**

**Postcode**

**GPS Co-ordinates (if available)**

In which Local Council area is the project located?

#### Land Ownership

Who owns the land on which the project is to be sited? (please tick)

Council  Crown  Other

If other, please specify:

Is the land leased or licensed? (please tick)

Yes  No  Not applicable

If yes, who from?



When does lease or licence expire? **Include a copy of the lease/licence as an attachment.**

Date:     /     /

Who holds public liability insurance cover for the project site?

Level of public liability insurance held.

\$



**Section C** (continued)

**Project Status**

Anticipated start date of the project. \*(assuming notification of grant funding by end December in current year)

Date:     /     / \_\_\_\_\_

Anticipated completion date of the project.

Date:     /     / \_\_\_\_\_

Has this project been identified as a priority project in a Local Government planning document? (please tick)

Yes    No

If yes, please provide details. \_\_\_\_\_

\_\_\_\_\_

What, (if any) studies or investigations have been conducted on the project (environmental, engineering, etc) to date?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Advise level of planning or development approval (eg D.A. prepared, assessment under EPA, REF approved, construction certificate).

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Section D

### EVALUATION CRITERIA

Please complete responses below (Maximum half a page, as separate attachment if required.)

#### Essential Criteria

- a) **A Lasting Nature** Demonstrate that the project involves infrastructure works of a lasting nature, which will improve the amenity on New South Wales waterways for a significant period of time.

---

---

---

---

---

---

---

---

- b) **Benefits** Applications must clearly demonstrate that the project infrastructure is available to be used by a broad cross-section of the boating public and marine sector, with unrestricted public access and its use is free of charge (ongoing maintenance charges may be acceptable in certain cases).  
The specific benefits to users and the broader community must be identified.

---

---

---

---

---

---

---

---

- c) **Completion Date** Demonstrate that the project will commence within six months of the announcement of the funding grant and be completed within 18 months of this date.

---

---

---

---

---

---

---

---



**EVALUATION CRITERIA** (continued)

- f) **Ongoing Operation/  
Maintenance Costs**      Demonstrate that where required, adequate ongoing operation/  
maintenance costs for the infrastructure works will be raised or made available.

---

---

---

---

---

---

**Desirable Criteria**

The following are desirable criteria, which will enhance an organisation's application for BBP grant funding:

- a) **Administrative  
Arrangements**      Provide evidence of administrative arrangements/capacity to  
support the proposed project.

---

---

---

- b) **Community  
Support**      Detail the level of recognition and support for the proposed project from the  
marine sector community and local boating user groups. (Attach supporting  
documentation if appropriate).

---

---

---

- c) **Environmental  
Benefit**      Identify any environmental benefits (e.g. a reduction in water pollution or noise)  
that will be generated through the completion of the project.

---

---

---

- d) **Socio-economic  
Benefits**      Provide details on any socio-economic benefits (e.g. to local industry  
and/or tourism) that will be generated through the completion of the project.

---

---

## Section E

### PROJECT COST AND FUNDING

#### Project Cost

Provide a cost breakdown of the major project elements

#### Cost (\$) Per Element

(GST exclusive cost)

	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
<b>Total project cost</b>	<b>\$</b>

The above cost breakdown should itemise out all major costs, including costs for (as appropriate):

- detailed feasibility/environmental study/design
- capital works – infrastructure construction
- capital works – associated works (eg; drainage/lighting etc)
- project management
- other specialist consultants/fees

BREAKDOWN OF PROJECT FUNDS	ORGANISATION PROVIDING FUNDS	FUNDING CONFIRMED AVAILABLE	FUNDING APPLIED FOR BUT NOT YET CONFIRMED
Cash		\$	
Loan/s		\$	\$
In kind donations		\$	\$
Voluntary labour		\$	\$
Federal Government		\$	\$
State Government ( <i>not NSW Maritime</i> )		\$	\$
Local Government		\$	\$
BBP funding grant		\$	\$
Other ( <i>please specify</i> )		\$	\$
<b>TOTAL FUNDING</b>		<b>\$</b>	<b>\$</b>

**BBP funding grant requested from NSW Maritime** (GST exclusive)

\$

Information should be provided to support details of available funds. This may include letters from other agencies, bank statements, loan details, how the value of voluntary labour or in kind support was determined.

## Section F

### ESSENTIAL SUPPORTING INFORMATION CHECKLIST

All applicants must include full details of the project, including:

**ACKNOWLEDGMENT THAT THE FOLLOWING DOCUMENTS ARE INCLUDED** (tick as applicable)

Evaluation criteria information (section D).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Project plans/sketches.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Project location drawing /photos.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	
Certificate of Incorporation (applicant).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Letter of support for the project from the Local Council.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Letter of support from owner of the land on which the infrastructure works will be sited.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Current audited financial statements of the applicant organisation (Local Government excluded).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
The applicant organisation's Constitution/Articles of Association (Local Government excluded).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
The organisation's lease or licence (Local Government excluded).	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
The organisation's building application and development/applications approvals.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable
Supporting documentation relating to available funding.	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> Not applicable

If any of the above information is not provided please explain why.

---

---

---

---

---

---

---

---

---

---

## Section G

### PRIOR FUNDING SOURCES

Please indicate if your organisation has sought grant or funding assistance:

1/ from any other source **for this project** over the last three years.

2/ from NSW Maritime for any other projects over the last three years.

PROJECT	YEAR OF APPLICATION	SUCCESSFUL/ UNSUCCESSFUL	CURRENT STATUS OF PROJECT (eg; completed, not started awaiting approval)
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

## Section H

### DECLARATION

I certify that this application has been approved for submission by the applicant organisation.

Print name: \_\_\_\_\_ Signature: \_\_\_\_\_

Position within organisation: \_\_\_\_\_ Date: \_\_\_\_\_

Witness: \_\_\_\_\_ Signature: \_\_\_\_\_  
(Print Name)

**This application can only be authorised by a member of the Executive (or appropriate delegated authority) of the applicant organisation.**