

Early Adopter Grant Program - Application Form

Form Preview

About the grant

* indicates a required field

Instructions for Applicants

Before completing this application form, you should have read and understood the grant guideline.

Grant Program resources:

- [grant guideline](#)
- [funding agreement](#)
- [grant program FAQs](#)
- our [website](#), for resources and information relating to the AI in NSW Planning project

Refer to the following documents for information on the AI Solutions Panel.

- [AI Solutions Panel supplier list](#)
- [AI Solutions Panel operating guideline](#)

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

Application Number

This field is read only.

Program Details

Funding of up to \$3 million in aggregate is available for NSW councils to implement one of the solutions from the Artificial Intelligence (AI) Solutions Panel to enhance the local development application process and improve assessment timeframes.

Grant Program Name

This field is read only.

The program this submission is in.

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;

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- 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 [Grant Program Guideline](#) and the [Funding Agreement](#) with this form and has fully informed itself of the Grant 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 Confirmation

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To be eligible for a grant under this Grant Program, the applicant must meet the following criteria:

The applicant is a council in NSW *

☐ Yes

The applicant commits to signing a funding agreement published with this application form *

☐ Yes

Review the [funding agreement](#)

The applicant commits to providing a statement of work for a product from the AI Solutions Panel, within 6 weeks of funding distribution *

☐ Yes

For further information on the AI Solutions Panel visit [our website](#)

The applicant commits to engaging an identified supplier from the AI Solutions Panel using the MICTA/ICTA contracting framework with the grant funding within 12 weeks of funding distribution *

☐ Yes

For further information on the AI Solutions Panel visit [our website](#)

The applicant has identified an opportunity where a supplier solution available from the AI Solutions Panel, can help to achieve a minimum of one of the following: *

- ☐ decrease timeframes associated with DA workflows
- ☐ meet an improved DA submission to lodgement success rate
- ☐ achieve time or process efficiencies for pre-lodgement related activities

A minimum of one option must be selected

The applicant's application is for at least one of the following types of expenditure (eligible project expenditure) *

- ☐ funding of delivery with limited implementation
- ☐ funding of implementation at scale (full implementation)

The applicant has attached a letter in support of all elements of the application from the council's General Manager or Chief Executive Officer *

☐ Yes

The applicant confirms this application provides information and/or documents to enable assessment of applicant and project eligibility *

☐ Yes

Contact Details

* indicates a required field

Please note for joint applications, the "organisation" and the "applicant" refers to the lead council applicant.

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Organisation Details

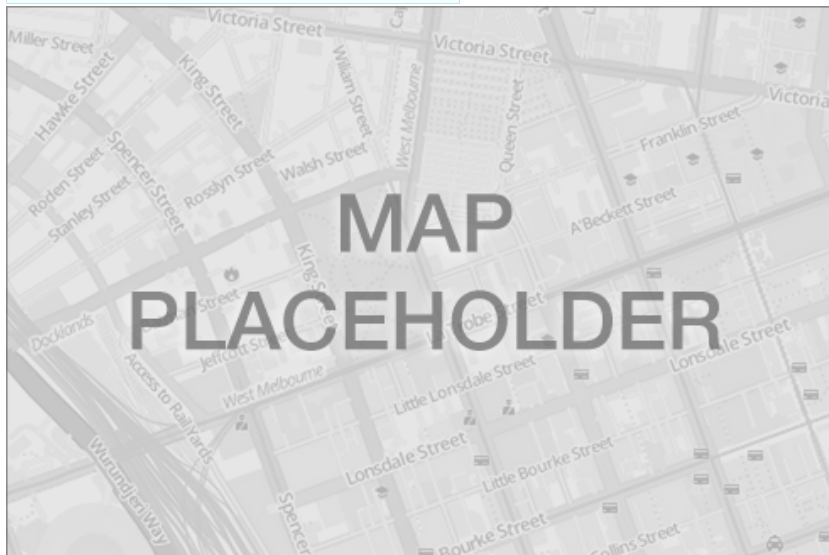
Organisation Name *

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



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.

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Email Address *

Must be an email address.

Website

Must be a URL.

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

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.

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Primary Contact Details

This person must be authorised by the council as the nominated contact for the application

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.

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 grant.

Joint Applications

Groups of 2 or more councils (with no upper limit), such as a joint organisation of councils, may apply.

Joint applications for funding must identify all councils involved and nominate a single council as the lead contact.

If you make a joint application, you must attach a declaration in the supporting documentation section of this form. In the declaration all the organisations involved must agree to the project, the proposed project management, governance arrangements and indicate the nature of their contribution to the funding and delivery of the project.

Is this a joint application? *

- ☐ Yes
☐ No

Please note only one application per collaborative project needs to be submitted by the lead council applicant.

Please provide the name and ABN details of the other council(s) included in this application and the contact details of the relevant project manager within the other council(s).

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Use one row per collaborating council.

Council name ABN	Name	Position	Email	Phone Number
			Must be an email address.	Must be an Australian phone number.
	First Name Last Name			
	First Name Last Name			
	First Name Last Name			

Project Details

* indicates a required field

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 *

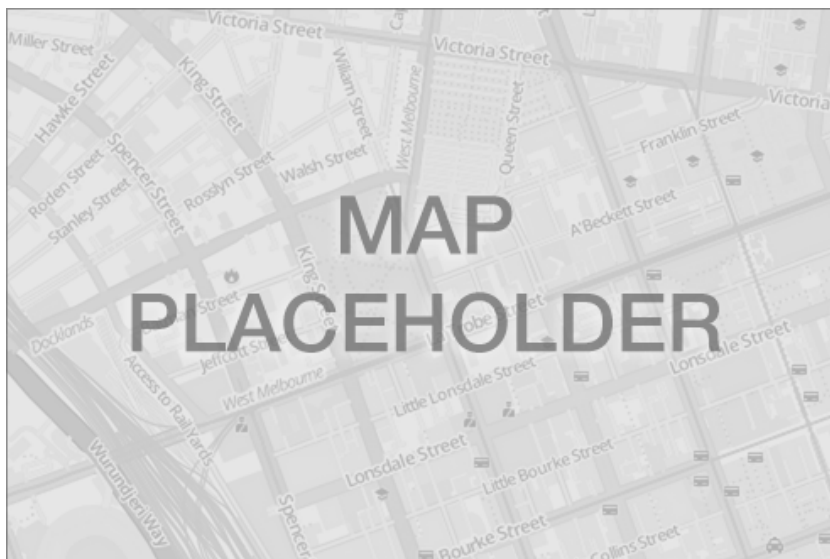
Anticipated end date *

Primary location of your initiative

Address

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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 start/end date

You have indicated above that either your project start date is after 01/08/2024, or, your project end date is after 30/06/2025, exceeding the timeframe for delivery under this Grant Program. Please update the details to ensure your dates fit within the timeframes outline in the grant guideline.

Identified product from the AI Solutions Panel

Refer to the following documents for information on the AI Solutions Panel.

- [AI Solutions Panel supplier list](#)
- [AI Solutions Panel operating guideline](#)

Which product from the AI Solutions Panel have you identified for this project? *

Responses to Evaluation Criteria A

* indicates a required field

Eligible applications are evaluated and scored based on these evaluation criteria.

Eligible applications that meet a minimum scoring threshold for criteria A.1 - A.2 will progress to evaluation against criteria B.1 - B.5.

Criteria A: (this section)

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A.1 Process improvement opportunity

A.2 Digital readiness

Criteria B: (next section)

B.1 Project scope

B.2 Delivery timeframe

B.3 Capability to deliver

B.4 Governance and risk management

B.5 Value for money

A.1 Process improvement opportunity (70%)

The evaluation team will consider the applicant's case for change, its relevance to the objectives of the Grant Program, and how it will achieve a minimum of one of the following:

- *decrease average timeframes associated with DA workflows*
- *improve the DA submissions to lodgement success rate*
- *time or process efficiencies for pre-lodgement related activities*

Please complete the following table for each performance metric that will be impacted using one row per performance metric.

A minimum of one performance metric must be included.

Selected performance metric	Your outcomes	Baseline performance	Target performance	Explanatory notes
	What changes do you expect will occur as a result of your project and how will they help contribute to the Grant Program objectives? Must be no more than 250 words.	Metrics from the most recently available data	Metric target for end of the grant period	Provide additional context if required, including on any calculations for performance inputs

Upload supporting performance metric data

Attach a file:

Upload supporting data for the current metrics if required

A.2 Digital readiness (30%)

The application demonstrates evidence of an endorsed digital strategy (or equivalent) that outlines council's overall strategic objectives, plans for digital transformation and innovation

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and risk mitigation or evidence of digitisation of council's DA related workflows and/or business rules, in alignment with the needs of the solution identified for the project.

Provide your response *

Word count:

Must be no more than 250 words.

Supporting documents can be attached to this application.

Upload your relevant digital policies, strategies and/or plans.

Attach a file:

Responses to Evaluation Criteria B

** indicates a required field*

Templates for the Activity Budget, Activity Plan and Activity Risk Assessment that are required for these responses can be found in the [Funding Agreement](#).

B.1 Project scope (20%)

The application:

- *is appropriately detailed in all sections*
- *clearly defines the project aim, scope (limited and/or full implementation) and outputs*
- *gives a complete breakdown of estimated costs, including attachments with relevant quotes or budget estimates from suppliers.*

Describe your project scope *

Word count:

Must be no more than 250 words.

Upload your completed Activity Budget *

Attach a file:

An Activity Budget template is provided in [Funding Agreement](#): Attachment 1

Upload quotes or other information to support your budget

Attach a file:

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B.2 Delivery timeframe (20%)

The application includes:

- *an activity plan with a detailed list of project tasks and milestones*
- *appropriate and realistic timeframes for the delivery of project milestones within the grant program timeline requirements.*

Upload your completed Activity Plan *

Attach a file:

An Activity Plan template is provided in [Funding Agreement](#): Attachment 2

B.3 Capability to deliver (20%)

The application demonstrates:

- *that the applicant has sufficient capacity and resources to deliver the project*
- *the capability of the applicant to deliver the project within the timeframe identified and to a high standard.*

Provide your response *

Word count:

Must be no more than 250 words.

B.4 Governance and risk management (15%)

The application:

- *details appropriate governance and risk management frameworks and includes a risk assessment*
- *for joint applications, has developed shared governance arrangements including clear arrangements on how funding, risks, liabilities and obligations will be allocated or apportioned between the co-applicants.*

Provide your response *

Word count:

Must be no more than 250 words.

Supporting documents can be attached to this application on the Supporting Documentation page (including a joint declaration).

Upload your completed Activity Risk Assessment *

Attach a file:

An Activity Risk Assessment template is provided in [Funding Agreement](#): Attachment 3

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B.5 Value for money (25%)

The application includes:

- *how the applicant's grant project will achieve value for money in the context of the available grant funding*
- *the extent of applicant in-kind and/or financial contributions to the project*
- *the positive effect the grant will have on the scope and timing of the project or otherwise benefits the applicant's grant project*
- *the likelihood of the applicant's grant project proceeding without the grant and the capacity of applicants to self-fund the project.*

Provide your response *

Word count:

Must be no more than 250 words.

Budget

* indicates a required field

Total Amount Requested

*

\$

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

Supporting Documentation

* indicates a required field

Letter of support from General Manager / CEO *

Attach a file:

Provide a letter evidencing that the General Manager supports all elements of this application. For joint applications, please upload a letter or letters of support from all collaborating council General Managers.

Upload any additional supporting documents

Attach a file:

Please ensure the filename of supporting documents links clearly with the relevant criteria or question it is supporting. There is no limit to the number of supporting documents that can be uploaded or to the content within a supporting document, however it is encouraged that supporting documents be concise.

Joint application declaration

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If you make a joint application, it must include a joint application declaration. In the declaration all organisations involved must agree to the project, the proposed project management, governance arrangements and indicate the nature of their contribution to the funding and delivery of the project.

Upload joint application declaration *

Attach a file:

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; and
- 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"/>

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.