

PROJECT TITLE:

STATE ID NUMBER:

### PROPONENT DETAILS

Organisation:	
Project contact:	
Postal address:	
Contact telephone:	Contact mobile:
Contact fax:	Contact email:

### SPONSOR ORGANISATION DETAILS (IF APPLICABLE)

Organisation:	
Contact person:	
Position on organisation:	
Postal address:	
Contact telephone:	Contact mobile:
Contact email:	

### INVESTMENT DETAILS

#### PROJECT SUMMARY

*Why is this project important, what will it do and what will this achieve – 200 words maximum*

#### PROJECT LOCATION

## PROJECT DURATION

Project Start Date:

Project Completion Date:

FUNDING *(minimum of one payment per year)*

GRANT PAYMENT	TOTAL (EXCLUSIVE OF GST)
On signature	\$
Second payment date	\$
Third payment date	\$
<b>TOTAL APPROVED</b>	<b>\$</b>

## DESCRIPTION OF ASSETS &gt; \$5000 TO BE PURCHASED WITH THIS FUNDING:

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## FOCUS OF PROJECT

GOAL	% OF FUNDING
Manage land resources sustainably	
Maintain and enhance the condition and beneficial uses of priority water assets	
Protect and enhance the marine and coastal environment	
Recover and conserve biodiversity	
<b>TOTAL</b>	<b>100%</b>

## PURPOSE OF PROJECT FUNDING

PURPOSE	% OF FUNDING
On-ground activities <i>e.g. fencing; revegetation; feral animal, weed, disease control</i>	
Capacity building <i>e.g. field days, training/education events, pamphlets, interpretive signs</i>	
Resource assessment <i>e.g. fauna, flora, weed, disease, water quality and land resource surveys</i>	
Planning <i>e.g. input into planning strategies, development of management plans</i>	
<b>TOTAL</b>	<b>100%</b>

## PROJECT MILESTONES

Milestones need to be linked to the investment outcomes described above.

MILESTONE NUMBER	MILESTONE	COMPLETION DATE	OUTPUT NUMBER*
1.			
2.			
3.			
4.			
5.			
6.			
7.			
8.			

\* Please match milestones to key outputs listed in the table below

## KEY OUTPUTS

Outputs need to be linked to the project milestones described above and should be reported using the output measures provided. If the output types provided do not cover your project activities effectively please add your own.

OUTPUT NO.	KEY OUTPUT	OUTPUT MEASURE	EXPECTED NUMBER
1.			
2.			
3.			

DESCRIPTION OF INTELLECTUAL PROPERTY CREATED AS A RESULT OF THIS INVESTMENT:

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## PARTICIPATION

A. What groups/organisations/businesses will be involved in the project?

List all who will contribute to the planning, implementation, administration and financial aspects of the project.

*e.g. community groups, schools, government, business, indigenous groups (please include your own group)*

NAME OF GROUP/ORGANISATION	DESCRIPTION OF CONTRIBUTION e.g. volunteer hours, equipment use, specialist services	TYPE OF CONTRIBUTION (Cash or in-kind*)	DOLLAR VALUE

\***In-kind** contributions include the donation of:

- time (volunteer hours, specialist services – see grant guidelines for latest volunteer rates)
- use of equipment
- materials