Organisation details				
Organisation				
Office address	Suburb	Po	stcode	
Postal address	Suburb	Po	stcode	
ABN				
Does the organisation have Publ (must be provided on request)	lic Liability Insurance? Yes		lo 🗆	
Applicant contact details				
Title				
First name	Last name			
Position				
Phone	Mobile			
Email				
Contact details of person resp	onsible for signing grant d	leeds		
Title				
First name	Last name			
Position				
Phone	Mobile			
Email				
Partnership				
Are you submitting this application organisation?	on in partnership with anothe	er Y	′es □ N	lo □
		(1	f yes, fill out this	section)
Partner organisation				
Office address	Suburb		ostcode	
Postal address	Suburb	F	ostcode	
Contact person				
Position				
Phone	Mobile			
Email				
Partner organisation ABN				
Does the partner organisation ha	ave Public Liability	Yes □	No □	
Previous Community Road Sa	•			
Has your organisation previously	received a Community Roa	d Safety Grant?	Yes □	No □
Do you have any outstanding accommunity Road Safety Grant?	•	a previous	Yes □	No □

### **CRSG Assessment Criteria**

The Community Road Safety Grants Program is competitive and applications will be assessed against the following criteria. It is important applicants address each of these selection criteria in their application.

Criteria	Description
Aligned with the Towards Zero     Strategy and Safe System approach	How the project will work towards road safety improvements to support the Towards Zero Strategy.
Address a road safety issue based on evidence	Why the road safety issue affecting the community needs addressing and evidence showing the project would assist.
3. Target group identified	How the project will meet the needs of the target group and benefit their road safety.
Support from stakeholders and the community	Who will contribute to the project and who in the community has an interest in seeing the project succeed.
5. Budget aligns with the project	Are the project costs reasonable and justified.

Project Outline					
What is being requested through this grant application?					
Variable Message Sign (VMS					
Digital Speed Display (DSD)					
What area(s) of the Safe Sys	stem approach will this project address?				
Safe road users					
Safe roads and roadsides					
Safe vehicles					
Safe speeds					

Project Outline
Describe the road safety issue or issues you want to address and the expected road safety
outcomes.
Describe what you want to do, the specific road safety issues you want to address and the expected road safety outcomes/benefits. No more than 250 words.
expedied road safety outcomes/benefits. No more than 250 words.
Describe the need for this project (why you want to do it)
Outline the evidence or research that supports why this project is needed, including who would like
to see the project succeed. Evidence can include crash data, anecdotal evidence, survey
outcomes, observational data and police records, or successful existing programs in another location or related field. No more than 500 words.
location of foldiod moid. Two more than occ words.

What issue or issues	are yo	u tryii	ng to a	ddres	s with	your	proje	ct?			
Drink or drug driving											
Driver fatigue											
Inattention and distract	tion										
Unlicensed driving											
Speeding											
Other											
What target group(s)	are yo	u tryir	ig to re	each w	ith yo	ur pro	ject?				
Children											
Young people											
Seniors											
Families											
Novice drivers											
Motorcyclists											
Cyclists											
Pedestrians											
Pedestrians Visiting drivers											
Visiting drivers	□ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □	r when	implei	mentin	-	-			nce, i	mainte	enance?

# **Deployment Plan**

Outline your plan for how the VMS/DSD will be deployed over the 12 month period from 1 July 2020 to 30 June 2021.

Location	Message	Dates	Notes
	The text that will be displayed on sign	Days/weeks (can be estimates)	Other information

Location	Message	Dates	Notes
	The text that will be displayed on sign	Days/weeks (can be estimates)	Other information

# **Project evaluation**

### **Evaluation**

How will you know your project is successful? What information will you collect? For example, crash statistics/data to measure change in crash numbers/casualties, monitoring attendance at activities or events. Photos and stories are also encouraged and these may be requested as part of a reporting process for successful applicants.

No more than 350 words

# **Project Budget**

Item	Cost (GST exclusive) Round to the nearest \$	Source of funding	Funding secured?	Notes

Budget totals	
Total amount requested from Community Road Safety Grant	
Total project costs	

### **Grant Application Checklist**

Before submitting your application please ensure you have completed the following:

- Check your organisation is eligible to apply
- Check your project is eligible under the Community Road Safety Grants Program
- Check your application has addressed the Project Assessment Criteria (page 2)
- Check all questions in this application form have been completed

### Right to information

Information you provide to the Department of State Growth and details of assistance may be subject to requests for public disclosure under the Right to Information Act 2009.

#### Personal information collection

You are providing personal information to the Department of State Growth, which will manage that information in accordance with the Personal Information Protection Act 2004. The personal information collected here will be used by the Department for the purpose of assessing your application and related activities. Failure to provide this information may result in your application not being assessed or records not being properly maintained. The Department may also use the information for related purposes, or disclose it to third parties in circumstances allowed for by law. You have the right to access your personal information by request to the Department and you may be charged a fee for this service.

#### **Declaration**

I understand that by submitting this application I have been authorized by the Applicant and any partner organisation named in this application (if applicable), to submit this application for funding. I solemnly and sincerely declare that the contents of this application are true and accurate.

#### **Submit**

Community Road Safety Grant Applications can be submitted via email or post.

roadsafetygrants@stategrowth.tas.gov.au GPO Box 536, Hobart TAS 7001