### Eligibility

#### \* indicates a required field

Tasmanian Sheep and Goats elD Industry Support Scheme Grant Program - 2024

### Applicants: please note

Applications must be received before 12pm (Hobart time) on 13 June 2024. Late applications cannot be accepted as the SmartyGrants portal closes at this time.

Before completing this application form, please read the program **Support Scheme** guidelines provided <u>here</u>. These guidelines contain the background to the grant, including the eligibility criteria and other important information that will inform this online application.

This first section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is crucial that you complete these questions before continuing with the application form, to check your eligibility.

There is a total funding pool of \$2.3 million available in 2024. The Support Scheme is eligibility based and applications will be assessed on merit. Depending on the number of eligible applications, and the proposed grant costs, it may not be possible to support all eligible applications up to full 75% of claimed expenses.

If you have any questions in regard to these eligibility criteria, please don't hesitate to make contact during business hours either by **phone: 0429 968 078** or via email **sheepandgoatelD@nre.tas.gov.au**.

Applications will not be assessed unless they are complete with all requested information is provided.

**Please Note:** SmartyGrants may time out after 20 minutes of inactivity and to prevent loss of information, we recommend that you save your application form frequently.

If you do contact us throughout the application process, please quote the application number below:

Application Number			
This field is read only.			
Sheep and goat organisation category:			
Please identify your organisation category  ☐ Processor (including abattoirs, knackeries) ☐ Saleyard(s) ☐ Livestock transporting agent without deport	, pet food processors)		

☐ Livestock transporting agent with depot(s) ☐ Livestock agency and/or agent One of these boxes must be selected
Processor - extra information requirement
Upload a copy of your Certificate of Accreditation, issued by the Department of Natural Resources and Environment Tasmania / Permit to Process issued by Primary Produce Safety Branch here:
Attach Certificate of Accreditation Attach a file:
There is a 25mb limit on each file that is uploaded.
Eligibility Criteria - Livestock and transporting agent without a depot
Please tick all items below which apply to your organisation. This section will help you confirm that you meet the eligibility requirements of the Support Scheme - 2024.
I confirm that: *  ☐ I have read and understands the program guidelines ☐ I am able to demonstrate alignment between my proposed grant and the aims of this scheme ☐ I have an Australian Business Number (ABN) ☐ I agree to register for a National Livestock Identification System (NLIS) account ☐ I am located in Tasmania ☐ If requested I agree to provide information for NRE Tas to assess my/our financial solvency ☐ I agree to an NRE Tas Officer to visit my site to assist me to determine, in conjunction with eID suppliers, what NLIS accredited eID equipment is required ☐ I have an account with an Australian financial institution ☐ I agree to supply quotes in my application ☐ I am one of the 'eligible applicants' in Section 3 of the Scheme Guidelines At least 10 choices must be selected.
Eligibility Criteria - Livestock and transporting agent with depot(s); Saleyards; or Livestock agency and/or agent.
Please tick all items below which apply to your organisation. This section will help you confirm that you meet the eligibility requirements of the Support Scheme - 2024.
I confirm that: *  ☐ I have read and understands the program guidelines ☐ I am able to demonstrate alignment between my proposed grant and the aims of this scheme ☐ I have an Australian Business Number (ABN)

□ I agree to register for a National Livestock Identification System (NLIS) account □ I am located in Tasmania □ If requested I agree to provide information for NRE Tas to assess my/our financial solvency □ I agree to an NRE Tas Officer to visit my site to assist me to determine, in conjunction with eID suppliers, what NLIS accredited eID equipment is required □ I have an account with an Australian financial institution □ I agree to supply quotes in my application □ I am one of the 'eligible applicants' in Section 3 of the Scheme Guidelines □ I have a Property Identification Code (PIC) corresponding to one of the groups identified in section 3 of the Scheme Guidelines
At least 11 choices must be selected.  Confirmation of eligibility - Processors
Please tick all items below which apply to your organisation. This section will help you confirm that you meet the eligibility requirements of the Support Scheme - 2024.
I confirm that: *  ☐ I have read and understand the program guidelines ☐ I am able to demonstrate alignment between my proposed grant and the aims of this scheme ☐ I have an Australian Business Number (ABN) ☐ I agree to register for a National Livestock Identification System (NLIS) account ☐ I am located in Tasmania ☐ If requested I agree to provide information for NRE Tas to assess my/our financial solvency ☐ I agree to an NRE Tas Officer to visit my site to assist me to determine, in conjunction with elD suppliers, what NLIS accredited elD equipment is required ☐ I have an account with an Australian financial institution ☐ I agree to supply quotes in my application ☐ I am one of the 'eligible applicants' in Section 3 of the Scheme Guidelines ☐ I have a Property Identification Code (PIC) corresponding to one of the groups identified in section 3 of the Scheme Guidelines ☐ I have an active Certificate of Accreditation At least 12 choices must be selected.
Confirmation of eligibility criteria
I confirm that: * ○ Yes ○ No If you can not confirm your compliance with all of the above statements, you are not eligible for this grant funding.

You meet the minimum eligibility requirements and are able to complete the rest of this application form.

You haven't met the minimum eligibility requirements and are unable to continue your application.

You are seeing this message because you have not or are unable to confirm "Yes" in the confirmation of eligibility criteria above.

If you would like to discuss this further, please talk to the contact for this grant program.

### **Contact Details**

\* indicates a required field

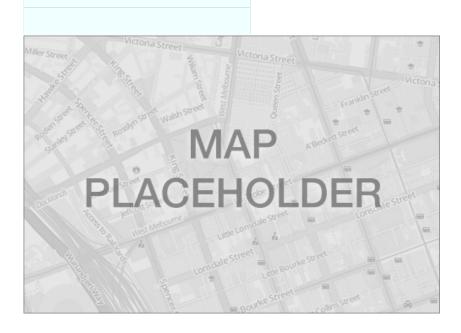
### **Applicant Details**

Please either state your name or that of your business: \*
Organisation Name

Make sure you provide the name that is listed in official documentation such as that with the Australian Business Register (ABR) or Australian Taxation Office (ATO).

#### **Applicant primary address**

Address



### **Applicant postal address**

Address

Applicant primary phone number *
Must be an Australian phone number.
·
Applicant email address *
Must be an email address.
Applicant website (if applicable)
Must be a URL.
Primary Contact Details of Applicant
Primary contact *
Title First Name Last Name
This is the person we will correspond with about this grant.
Position held in organisation *
e.g., Manager, Board Member or Fundraising Coordinator.
Primary contact primary phone (mobile) number *
Must be an Australian phone number.
Primary contact office phone number
Must be an Australian phone number.
·
Primary contact email address *
This is the address we will use to correspond with you about this grant.

### Organisation Details

\* indicates a required field

Please provide your Australian Business Number (ABN) here \*

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 Busi	ness 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	

### **GST Registration Status**

ls your organisatior	registered f	or GST *
----------------------	--------------	----------

- Yes
- No

#### What is your organisation's legal structure? \*

- Company
- Sole Trader
- Partnership
- Trust

select most appropriate legal structure.

### Please Provide your Australian Company Number (ACN) here:

Must be a eleven digit number

### How do you sign legal documents?

### How do you sign legal agreements? \*

- Company not using a common seal
- Company using a common seal
- Individual
- Partnership
- Trust

This information will determine the signature block to be used on an agreement between us, should your grant application be approved.

#### **Bank Account Details**

Please provide your bank account details below. This is the account that you would like the grant funding deposited into, should your application be successful:

Bank Account * Account Name	
Account Name	
BSB Number Account Number	
Must be a valid Australian bank account format.	
Details of your Infrastructure Pi	roiect
* indicates a required field	•
mulcates a required field	
Infrastructure Project Name *	
initustructure i roject Name	
Provide a short description (100 words recomme	nded) of your project - what are you out to do?
Anticipated start date *	Anticipated end date *
Must be a date and no earlier than 1/3/2024.  If unknown, provide your best guess, don't leave	If unknown, provide your best guess, don't l eave
blank	blatik
Please provide a short summary of you	r Infrastructure project *
Describe three things you want the project to ac others (200 words recommended)	hieve in terms of benefits for participants and/or

What are the major steps / stages (i.e. milestones) involved in the installation of the eID hardware and software?

Milestones	Start Date (if known)	Finish Date (if known)	Location (if relevant)	Notes
1 1 /		Must be a date and no later than 31/10/2024.	(e.g. add building reference, address, suburb, otherwise type 'unknown' or 'not applicable')	Add explanatory notes if required

### Consignment of livestock

How many sheep (per head) have moved through your organ months? *	isation in the last 12
State as a number. If none state "0".	
How many goats (per head) have moved through your organ months? *	isation in the last 12
State as a number. If none state "0".	

How many cattle (per head) have moved through your organisation in the last 12 months?  $^{\ast}$ 

State as a number. If none state "0".

### Site Plan

Provide and attach a site plan /photo showing detail of proposed works including installation locations for essential equipment (unless your are applying for a wand)

Attach a file:

There is a 25mb limit on each file that is uploaded

### **Budget**

\* indicates a required field

### **Budget (GST exclusive)**

Please outline your project budget in the table below. All amounts should be GST exclusive.

Provide clear descriptions for each budget item Grant Item column, examples of expenses could include 'eID readers', 'software training', 'staff x 40 hours' or any of the other dropdown categories in the Purpose column.

It is expected that your submission provides value for money. Seeking more than one quote should form part of your due diligence process. Quotes from Tasmanian based suppliers is encouraged.

Grant Item	Grant Item - eID Infrastructure type	Quote/Invoice amount (GST Ex)
		\$
		\$
		\$
		\$
		\$
Enter brief description of requested item	Please select from drop dow	n list. Please enter to two decimal places

### **Budget Totals**

Total Expenditure Amount	Grant Requested Amount	
\$	\$	
This number/amount is calculated. This is the total expenses for your project budget	This number/amount is calculated. What is the total financial support you are requesting in this application?	
	My Contribution	
	This number/amount is calculated. This is the minimum contribution you are expecte to make towards this project.	

# Attach a file:

Please attach quotes expenses. \*

There is a 25mb limit on each file that is uploaded

### **Applicant Capacity**

\* indicates a required field

To assist in the assessment of applications, please provide supporting information on your organisation's ability to undertake the works proposed within your infrastructure project. Please include information on how you will measure progress of your project to ensure its successful completion. \*

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, etc.) and how you will complete this project/program within the proposed timelines. Provide information also about any past work that may demonstrate your organisation's capacity to undertake this work. Provide links to further explanatory material if available/relevant.

#### Certification and Feedback

\* indicates a required field

#### Certification

This section must be completed by an appropriately authorised person on behalf of the applicant (may be different from the contact person listed earlier in this application form).

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant is approved for this grant, I/we will be required to accept the terms and conditions of the grant deed or as outlined in the letter of approval.

l agree *	○ Yes		○ No	
Name of authorised person *	Title  Must be a authorised	First Name senior staff member, other	Last Name board member or	appropriately
Position *	Position he	eld in applicant organ	nisation (e.g. CEO, T	reasurer)
Contact phone number *	We may co	Australian phone nuntact you to verify t licant organisation		is authorised
Contact Email *				
	Must be ar	email address.		
Date *	Must be a	date and between 1/	/3/2024 and 30/9/20	)24.
	Must be a	date		

### **Applicant Feedback**

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback. Please note that if you would rather not provide any feedback, that is Ok.

Please indicate  ○ Very easy	how you found to Easy	the online application of the online applica	•	<ul><li>Very difficult</li></ul>
How many minutes in total did it take you to complete this application? *				
Estimate in minutes i.e. 1 hour = 60				
Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.				
		_		