

Environmental Grants 2026/27 - Application Form

Form Preview

Eligibility

* indicates a required field

Important note

Before completing the Environmental Grants 2026/27 Application Form, you should have read and reviewed the [Program Guidelines](#).

Incomplete applications and/or applications received after the closing date will not be considered. While not all questions are mandatory, every question in the application is designed to inform the assessment panel on the merits of your project. Failure to answer a question may result in an incomplete picture and subsequent lower score at assessment. You will primarily be assessed on information you enter in response to the questions. Do not answer simply with 'see attachment'.

If you have any questions in regards to the grant application process, please contact the Environmental Grants team on 1300 434 434 or email environmentalgrants@northernbeaches.nsw.gov.au

Privacy

Personal information collected by Council is held and used as permitted by the *Privacy and Personal Information Protection Act 1998 (PPIPA)*.

When you lodge a grant application, Council will collect personal information from you within the meaning of PPIPA.

The Privacy Protection Notice (below) provides details regarding the collection, use and your rights regarding access and correction of your personal information.

Privacy Protection Notice

Purpose of collection: For Council purposes including Council's grant program

Intended recipients: Northern Beaches Council staff and data service providers engaged by Council

Supply: The supply of this information is voluntary although it may result in Council not being able to process your application if not supplied

Access / Correction: Contact Customer Service on 1300 434 434

Collected and held by: Collected and held by Northern Beaches Council.

Confirmation of Eligibility

It's crucial that you confirm your eligibility before proceeding to ensure you do not waste your time applying for an unsuitable grant.

Eligible applicants include:

- Incorporated not-for-profit organisation

Environmental Grants 2026/27 - Application Form

Form Preview

- All other types of community organisations, unincorporated community groups, individuals and sole traders sponsored /auspiced by an eligible not-for-profit organisation that is able to apply in their own right

Non-local applicants must demonstrate tangible benefits to the Northern Beaches community.

If you are choosing a sponsor/auspice, we encourage you to choose one that is relevant to the sector and that can support the implementation of the proposal.

Ineligible applicants include:

- State government organisations
- Political parties
- For-profit bodies
- Schools, including parent and citizen associations

To be eligible for funding, applicants must:

- Be up to date with any Council grant reporting or acquittals
- Have no outstanding debts owed to Council
- Demonstrate the grant will be used for a purpose in the public interest primarily for the local community.

I confirm I am eligible to apply *

Yes

Registration

* indicates a required field

Type of applicant

Are you applying as an individual or organisation? *

- Individual or sole trader with a sponsor/auspice
- Unincorporated community group with a sponsor/auspice
- Eligible not-for-profit organisation

Applicant Contact Details

Primary contact person *

Individual Organisation

Organisation Name

First Name

Last Name

This is the person we will correspond with about this grant

Primary contact person's role within applying organisation *

Position held (Eg. CEO, Treasurer)

Environmental Grants 2026/27 - Application Form

Form Preview

Street Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.

Postal Address *

Address

Address Line 1, Suburb/Town, State/Province, and Postcode are required.
(All written communications will be directed to this address)

Primary phone number *

Must be an Australian phone number.

Back-up phone number

Must be an Australian phone number.

Primary contact person's email address *

This is the address we will use to correspond with you about this grant.

Website

Must be a URL.

Organisation Details

Organisation Entity Name (for organisations with an ABN as it appears on ABN Lookup) *

Organisation Name

Check your spelling and make sure you provide the same name that is registered in official documentation such as with ASIC, ACNC or Fair Trading.

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

Environmental Grants 2026/27 - Application Form

Form Preview

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.

What type of incorporated organisation are you? *

- Australian charity or non-profit organisation registered with ACNC
- Incorporated non-for-profit organisation registered with Fair Trading NSW
- Company limited by guarantee, registered with ASIC
- Other:

Please provide your incorporation number

Incorporated Association or Australian Corporation Number must be entered here if your organisation has one.

Please upload supporting documentation which demonstrates you are registered with ACNC (if you are a charity) or properly constituted with a statement of purpose/constitution reflecting you are a not for profit. *

Attach a file:

Sponsorship and Collaboration

* indicates a required field

Do you require a sponsor/auspice?

Unincorporated organisations and individuals are eligible to apply when sponsored by an organisation who is eligible to apply in their own right. If successful in securing a grant under this program, the funding agreement will be made with the Sponsor organisation not with the individual or unincorporated group.

Sponsor/Auspice Organisation

ABN of sponsoring organisation

The ABN provided will be used to look up the following information. Click Lookup above to check that you have entered the ABN correctly.

Environmental Grants 2026/27 - Application Form

Form Preview

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

Sponsor/Auspice Organisation Details

In choosing a sponsor, we encourage you to choose one that is relevant to the sector and that can support the implementation of the proposal.

Sponsor Organisation Trading Name *

Sponsor Organisation Entity name - if different

Organisation Name

Primary contact person at sponsor organisation *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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We may contact this person to verify that this sponsor arrangement is valid and current.

Position held in organisation *

e.g. Manager, CEO

Contact person's primary phone number *

Contact person's email address *

Must be an email address

Contact person's back-up phone number

Environmental Grants 2026/27 - Application Form

Form Preview

Sponsor Organisation Postal Address (All written communications regarding this grant will be directed to this address) *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Sponsor Primary Street Address *

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

Sponsor organisation's website

Must be a URL

Please provide a brief description of the sponsor organisation and what services, activities and/or facilities they provide *

Word count:

Must be no more than 100 words.

What type of organisation is the sponsor? *

- Australian charity or non-for-profit organisation registered with ACNC
- Incorporated not-for-profit organisation registered with Fair Trading NSW
- Public company limited by guarantee, registered with ASIC
- For-profit company
- Other:

Please provide the sponsor's Incorporated Association or registration number

Please attach a copy of signed and dated correspondence between the sponsor and unincorporated applicant confirming this sponsor arrangement is valid and current *

Attach a file:

Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date.

Please upload supporting documentation which demonstrates the auspice is a registered with ACNC (if they are a charity), or properly constituted with a statement of purpose/constitution reflecting they are a not for profit. *

Attach a file:

Environmental Grants 2026/27 - Application Form

Form Preview

Project Collaboration / Partners

Will you collaborate with other individual/s, or partner with the community or other organisations to undertake the project? *

Yes No

Please describe the partnership/collaboration with each organisation and/or individual *

Upload letters of support from any collaborators partners

Attach a file:

Letters of support must have full name of contact, organisation name, phone number and email address

Project Details

* indicates a required field

Project Title *

Must be no more than 10 words.

Provide a name for your project. Your title should be short but descriptive.

Please provide a detailed description of your project, including key deliverables *

Word count:

Must be no more than 300 words.

Why does your project need to happen? *

Word count:

Must be no more than 200 words.

Describe the specific issue or need you want to address (200 words recommended)

Outline your approach to delivering the project *

Environmental Grants 2026/27 - Application Form

Form Preview

Word count:

Must be no more than 300 words.

How are you going to do your project? Highlight any experimental or innovative ideas.

Please provide all photos or other supporting material for this project.

Attach a file:

Do not upload quotes or financial information here.

Public Liability Insurance

Please refer to the [Australian Government webpage on business insurance](#) if unsure what insurance is required.

Please upload your Public Liability Certificate of Currency and other relevant policies *

Attach a file:

Owners Consent or Letters of Support

Please refer to the Program Guidelines to confirm if your project requires Owners Consent or a letter of support.

Is your project being undertaken on a Council or privately owned building or asset? *

- Yes
 No

Please upload evidence of Owners Consent or letter of support *

Attach a file:

Solar panels on any Council asset will require Owners Consent from Council. Any onground works on Council land will require a letter of support.

Child Protection

Does your proposed project involve working with children? *

- Yes No

Organisation working with children

If so, please upload your organisation's Child Protection Policy *

Attach a file:

Environmental Grants 2026/27 - Application Form

Form Preview

Individual applicant working with children

If so, please provide your valid Working With Children Check (WWCC) number *

Project Outcomes and Measurements

* indicates a required field

Expected outcomes

Describe what are the expected outcomes of your project *

Must be no more than 200 words.

Describe what you want the project to achieve in terms of expected benefits.

How will you measure that these outcomes have been achieved? *

Word count:

Must be no more than 150 words.

What does 'success' look like?

Funding Categories

This program covers a number of categories. Please select the category to which your project belongs:

Which category does your project address?

- Restoration and protection projects that support the environment of the Northern Beaches
- Resource efficiency and sustainability projects including climate change initiatives, environmental resilience projects, and projects that support energy efficiency and carbon reductions, water savings and re-use, and waste reduction and recycling
- Sustainability education, across all areas

Select all that apply

Alignment with Council's strategies and objectives

The objective of the Environmental grants stream is to assist Council and to support the community to deliver the commitments and aspirations in our recently adopted [Protect. Create. Live Northern Beaches Environment and Climate Change Strategy](#). This Strategy has nine different themes, each with associated aspirations and commitments, many of which are applicable to this grant program.

Environmental Grants 2026/27 - Application Form

Form Preview

Select which commitments from the Northern Beaches Environment and Climate Change Strategy your project addresses

- Improving the quality of existing bushland
- Improving the connectivity of wildlife corridors
- Protecting our receiving waters and riparian areas
- Protecting and improving the condition of creeks and riparian vegetation
- Minimising threats to aquatic ecosystems
- Reducing the impact of urban runoff on our coast and waterways
- Maximising retention of natural coastal habitat and improve the quality of coastal vegetation
- Maximising retention and ecological condition of key habitats
- Reducing the impact of invasive species
- Improving biodiversity in the urban environment
- Reducing resource consumption in our community
- 50% of suitable premises with solar panels installed by 2030
- Increasing the existing tree canopy to expand the local green grid
- Reducing carbon emissions in our community by more than half by 2040
- Maintaining our reducing overall drinking water use in our community by 2040
- Diverting 85% of waste from landfill by 2040
- Maximising the retention of bushland
- Actively working to keep single use plastics and other litter out of our waterways

Select all that apply

How does your project address the selected strategy commitments? *

Word count:

Must be no more than 150 words.

Outline any other benefits that will be derived from this project?

Word count:

Must be no more than 150 words.

Other benefits could be social, progress/leadership, educational and economic

Project Timeline

* indicates a required field

Funding timeframe

All funded aspects of projects must start after 1 November 2025 and all expenditure must be completed by 31 December 2026.

Anticipated start date *

Must be a date and no earlier than 1/11/2025.
If the anticipated start date of your project is unknown, provide your best guess.

Anticipated end date *

Must be a date and no later than 31/12/2026.
If unknown, provide your best guess.

Environmental Grants 2026/27 - Application Form

Form Preview

Provide a brief timeline of your proposed activities

Activity	Date/Timeframe

Project Longevity

How long will your initiative continue after the funding has been expended? *

Word count:

Must be no more than 100 words.

Applicant Capacity

* indicates a required field

Describe the experience and capacity that you or your organisation have to demonstrate how effectively you can deliver this project *

Word count:

Must be no more than 100 words.

This could be a similar project to the one proposed or previous grant management experience.

Budget

* indicates a required field

Amount requested

All figures entered below are to be exclusive of GST. Grant amounts awarded will have GST added if organisation is registered for GST.

Total Amount Requested

*

\$

Must be a whole dollar amount (no cents) and no more than 5000.

What is the total financial support you are requesting in this application?

Environmental Grants 2026/27 - Application Form

Form Preview

Total Project Cost *

What is the total budgeted cost (dollars) of your project?

Budget (GST exclusive)

Please provide clear descriptions for each budget item in the 'Income' and 'Expenditure' tables below, including details of other funding that you have applied for, whether it has been confirmed or not. All amounts should be GST exclusive.

An example budget is provided in the guidelines FAQs. Examples of income include 'Council environmental grant', 'trivia fundraising night', 'company X sponsorship' and/or 'internal organisation contribution'. Examples of expenses include 'facilitator fees', 'venue hire' or 'project materials'.

Use the 'Notes' column for any additional information relevant to your project.

If there is no value required in a column, please enter 0.

Do not add commas to figures - e.g. type \$1000 not \$1,000 - this will ensure your figures for each table total correctly.

Income Description	Funding Source	Is this confirmed?	Income Amount Cash (\$)
			\$
			\$
			\$
			\$

In-kind support

Identify in-kind contributions such as donated goods and (professional) services or volunteer hours below.

As a guide, please calculate: • Volunteer time \$25 per hour • Staff wages \$50 per hour • Professional fees \$75-100 per hour

Type of in-kind support	Value of in-kind support
	\$
	\$
	\$
	\$

Expenditure

Please detail what the items or activities are and what funding source (ie this grant, or your own organisation contribution etc) will pay for it. Please refer to the Guidelines for assistance on preparing your budget table.

Expenditure Description	Funding Source	Amount Cash (GST ex)
		\$
		\$

Environmental Grants 2026/27 - Application Form

Form Preview

		\$
		\$
		\$
		Must be a dollar amount.

Budget Totals

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT).

This enables Council to ensure that all funds related to the project are accounted for.

In-kind support is not cash income so will not be included in budget totals.

Total Income Amount

\$

This number/amount is calculated.

Total Expenditure Amount

\$

This number/amount is calculated.

Income - Expenditure

This number/amount is calculated.

THIS MUST BE '\$0.00'

Please attach quotes for any good or services relating to your project *

Attach a file:

You must provide minimum two quotes for any individual items over \$2,000.

If you do not receive the full amount you are requesting, can your project still proceed? *

Yes

No

Responding 'yes' does not mean you can't get full funding, however if your project cannot proceed without the full amount you are requesting you are at risk of receiving no funding.

If you are granted partial funding, how will the project outcomes be achieved? i.e. can you reduce the scope, or stage the project? *

Please describe which components of the project would be undertaken, in the event you received partial funding.

Certification and Feedback

* indicates a required field

Certification

Environmental Grants 2026/27 - Application Form

Form Preview

This section must be completed by an appropriately authorised person on behalf of the eligible organisation (may be different to the contact person listed earlier in this application form - ie the sponsor organisation).

I/We certify that the information given in this application is true and correct.

I/We accept that electronic submission of application will be taken as consent to the terms of declaration by the office bearer submitting this application.

I agree *

Yes

Name of authorised person *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be a senior staff member, board member or appropriately authorised person. Please note: the principal office bearer of the applicant organisation (or the auspice organisation) will be required to sign any funding agreement associated with successful grant applications, thereby accepting responsibility for the delivery of the project.

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Contact phone number *

Must be an Australian phone number.
We may contact you to verify that this application is authorised by the applicant organisation

Contact email *

Must be an email address.

Submission of application does not guarantee funding. The costs for producing an application are borne by the applicant. Council reserves the right to change the level of funding available. Any changes will be publicised on our website www.northernbeaches.nsw.gov.au

Acknowledgement

Receipt of your application (including a copy of submitted details) will be acknowledged by automated email to the email address used to log on to this application. If you have not received this after submitting, please contact the Environmental Grants Team on 1300 434 434 or email environmentalgrants@northernbeaches.nsw.gov.au

Applicant Feedback

Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

How did you find out about this program? *

Environmental Grants 2026/27 - Application Form

Form Preview

Other:

What was your experience of the online application process *

- Very easy Easy Neutral Difficult Very difficult

How many minutes in total did it take you to complete this application? *

a number

Estimate in minutes i.e. 1 hour = 60 minutes

Please provide us with your suggestions about any improvements to the application process