# Boating Safety and Facilities Program 2020-21



Search and Rescue Application Form

Training

Section 1	Contact Information					
Applicant Org	ganisation Details					
Name of Organ	isation:					
Postal Address:						
Town/Suburb:			Postcode:		State:	
Main Street Add	dress: (if different from above)					
Town/Suburb:			Postcode:		State:	
Contact pers	on (This is the person who will manage the project	t on your be	ehalf)			
Title:	First name:	Last nam	ne:			
Position:						
Telephone:		Mobile:				
Email:						
Your organisati	on's Australian Business Number (ABN), if you have	one:				
Is your organisat	ion registered for GST? yes no					
Is your organisat	ion non-profit as defined by the ATO? yes no					
Section 2	Project Overview					
Project name	(We will use this name on all correspondence. Plea	ıse use 10 w	ords or less.)			
Project descr	iption (Describe the project in 50 words or less. W	e will use th	is in reports and othe	r publications	s.)	
Please tick the bo	ox that best describes your project:					
New Vessel / Equipment						
Upgrade to existing Vessel / Equipment						

## **Section 3** Additional Questions

1.	Is your organisation an approved Volunteer Marine Search and Rescue organisation according to the Marine Search and Rescue Arrangements 2017? yes no
2.	If your application is for replacement of existing equipment, what percentage of equipment usage relates to boating search and rescue activities?
3.	What else is the equipment used for?
4.	Will the existing equipment be traded in, sold or retained?
5.	In the past 2 years, how many Search and Rescue operations were undertaken
	for which a Marine Incident Report has been allocated?
6.	If the required number of quotes has not been provided please explain why?
7.	Have you contacted the Marine Search and Rescue Office, Emergency Management Victoria to discuss this application? yes no (if yes, please provide contact details)
•	If this modification is fau a vessel what FMV MCAD along af vessel describe according with 2
8.	If this application is for a vessel, what EMV-MSAR class of vessel does this purchase align with?  Class 2 Class 3A Class 3B Class 4 C
9.	If this application is to purchase a vessel, is the vessel quotation from one of the EMV-MSAR office preferred suppliers? yes no (Note vessels not purchased from preferred suppliers will not be supported).
10.	Detail any connection by way of membership or any other means between the organisation and any person/company supplying a quotation.

### **Section 4** Project Details that address the Assessment Criteria

Please indicate how your project addresses the following assessment criteria: Why? How? Who? And What? Refer to the program guidelines and assessment criteria to help you answer the questions.

Why is this project needed?
– Please describe the demand for this project.
For equipment, explain why new/replacement equipment is required. Where applicable, please describe the age and condition of existing equipment. If replacing a vessel or engine, an independent condition report is required.
For training, explain why this training is necessary.
How will the project be delivered?
– Describe the proposed works (include plans as an attachment).
- Provide details of your project planning to date. Attach any documents that demonstrate how you have developed the project to date.
– Include details of risk assessment and mitigation.
Who is involved?
- Detail those supporting the project and if possible, attach supporting documentation.
- Detail operator qualifications for all vessel operators (Attach a separate sheet if necessary).
<ul> <li>For training, show the expected number of candidates for each proposed course.</li> <li>All quotes for training must be from a Registered Training Organisation.</li> </ul>

<ul> <li>What will the project achieve?</li> <li>Describe the outcomes and benefits to be derived from the project.</li> <li>Refer to the aims and assessment criteria in the Search and Rescue section of the BSFP Program Guidelines.</li> <li>Show how your project contributes to at least one of these aims.</li> </ul>					
Section 5 Key tasks a	nd timeframes				
Please identify the key tasks for your pro	eject and an indicative timeframe.				
Task:					
Expected Start Date:	Expected Finish Date:				
Section 6 Project Bud	get				
*Please refer to the Program Guidelines for more information on quotations and supporting evidence requirements. For projects under \$25,000 please supply one written quote. For projects costing \$25,000 and above you should provide three written quotes or appropriate detail to establish the accuracy of your costings.  Note: Projects in excess of \$150,000 may be required to conduct a competitive tender process.  Quote details (insert company name of each quote)					
Total cost (GST exclusive)	\$				
Travel and accommodation for training (must not exceed 10% of A)	\$				
Total cost of project A (preferred quote)*	\$				
Your organisation's contribution (not required for training applications)	\$				
Any other government funding	\$				

\$

Any other funding

Total contributions	В	\$
Outstanding balance (subtract B from A)	С	\$
For vessels/equipment, grant amount sought (lesser of C or 80% of A)	D	\$
What project income is confirmed? other government, community, busi	Pleas	se indicate whether income from your organisation, or other contributions is confirmed.

#### **Declaration**

I state that the information in this application and attachments is to the best of my knowledge true and correct. I will notify Better Boating Victoria of any changes to this information and any circumstances that may affect this application. I acknowledge that the Department of Transport may refer this application to external experts or other Government Departments for assessment, reporting, advice, comment or for discussions regarding alternative or collaborative grant funding opportunities. I understand that the Department of Transport is subject to the Freedom of Information Act 1982 and that if a Freedom of Information request is made, the Department of Transport will consult with the applicant before any decision is made to release the application or supporting documentation. I understand that this is an application only and may not necessarily result in funding approval.

Signature:			
Date:			
Print name:			
Position:			

(To be signed by a person with delegated authority to apply – i.e. Chief Executive Officer or Board Chairperson.)



#### Supporting documents

Please submit the following documents with your application:

- Vessel Specifications
- Details of operator competencies for all vessel applications
- Written quotes



#### Submit your application

Submit your application to Better Boating Victoria by email: BBV.Communications@ecodev. vic.gov.au no later than 11.59pm, Monday 15 March 2021.

For further information contact: free call 1800 337 222.



