Geelong Landcare Network

Project Expression of Interest Form

Office use only	
Date Received	
Approved	
Fund_1	
Fund_2	
Fund_3	

I. CONTACT D	DETAILS	
Applicant(s) name: (Groups please also include contact person for project)		
Property address:		
Phone No(s):		
Fax No:		
E-mail address:		
ABN: (if applicable)		
Are you GST registered? ☐ Yes	□No	
lf you are applying as an individual		
Are you a current Landcare Member?* ☐ Yes *You must be a Landcare member to be eligible for funding	□No	
If so, which Landcare Group:		
Have you completed a recognised Environmental Management Plan such as Environmental Best Management Practice		
Have you completed a recognised Whole Farm Plan?	□ Yes □	No
What is the major land-use(s) on the area you are planning to undertake the project? (please tick)		
□cropping □ Beef □Sheep □ Small Acreage □ Other (please describe):	Farm Forestry Nature Conservation	n
Average herd/flock size:	Property area:	
Project Name :		
If you are applying as a group		

☐ Yes

☐ Yes

☐ Yes

□ No

□ No

□ No

Is your group a member of the GLN?

Is your organisation incorporated?

Does your organisation have insurance?

2. ABOUT YOUR PROJECT

Project address: (if diff	erent from contact address)			
Is the project site:	☐ Private land	☐ Public land		
Briefly describe your	project:			
Which of the followin □ Waterway protection □ Shelterbelt revegetat □ Revegetation to link □ Protection and/or en □ Erosion control □ Salinity management □ Farm forestry □ Community awarene □ Other (please specify):	n ion existing vegetation hancement of native r		e tick one or more boxes)	
Which do you requir ☐ Native seedlings and/ ☐ Fencing materials ☐ Other items (please specific please specif	or direct seed			
If your project involves revegetation				
Approximate Area (ha):			
Width of planting (m	i): (if applicable)			
Revegetation type:		☐ direct seed	☐ seedling planting	
Will seedlings requir	e trees guards?	□ Yes	□ No	☐ Unsure

If your project involves fencing		
Fence length: (for each	section i.e. creek fence=400m, bush fence= 200m)	
Type of fence	No. of plain wires:	
	No. of electric wires:	
	No. of barb wires*:	
	☐ Ringlock fence	
*Landcare cannot fund the use of l	parb wire	
If your project invol	ves weed control	
Weeds to be control	lled:	

4. PROJECT MAP

Please draw a map of the project site that includes distances, length, and width of works, a north arrow, nearby remnant vegetation, weeds infestations, waterways and the nearest road.

41	Creek		Remnant Vegetation
COBDEN RD	Road	DIRECT SEED	Other Vegetation
\ \ \ \	Existing Fence	AMM?	Proposed Revegetation Project
• • • •	Proposed Fence	200	Wetland, Dam, etc.

3. YOUR DECLARATION

I declare that the information given on this form is true and correct		
Signature:		
Name:		Date:

Privacy Notice: Personal information supplied by you and/or your group contained on this project application or any future correspondence is collected, stored and maintained for the purpose of facilitating and administrating GLN incentives. This information maybe disclosed to relevant government organisations (eg nurseries) for the purpose of administering the grant for which the information was collected. You may access this information by contacting the Geelong Landcare Network

Please forward your completed expression of interest form to:

Geelong Landcare Network, 23 High St., Inverleigh 3321 or geelonglandcarenetwork@gmail.com

For information and assistance please contact Peter Stray, Chair On-ground Works Committee, on 0490 145 481 or Tim Trottier, Landcare Facilitator, on 0438 525 502 or geelonglandcarenetwork@gmail.com

Please keep a copy of this form for your own records

Please note that submitting this expression of interest does not guarantee you will receive funding for your project.

Projects are funded subject to funding availability, site inspection and approval from the GLN.