

# 2026 TAC LGGP - VMS Application Form

## Form Preview

### Introduction

\* indicates a required field

Thank you for your interest in the **Variable Messaging Sign (VMS) category** of the TAC Local Government Grant Program.

Grants of up to \$30,000 (ex. GST) are available for LGAs to purchase VMS to support road safety initiatives.

Local Government Authorities are welcome to submit one VMS application per funding round. Before commencing this application, please ensure you have read and are familiar with the [Funding Guidelines](#).

Incomplete applications or applications received after the round close at **3pm Wednesday, July 22**, will not be accepted.

### TAC support

If you have any questions, please do not hesitate to contact the TAC Road Safety Grants Team at [lgagrants@tac.vic.gov.au](mailto:lgagrants@tac.vic.gov.au).

If contacting us regarding your application, please reference the application number below:

#### Application Number

This field is read only.

### Technical support

TAC staff involved with each of the grant programs are not technical specialists. If you experience technical difficulties (e.g. you can't submit the form), then you should make contact with the SmartyGrants help desk to help resolve your query.

E-mail: [service@smartygrants.com.au](mailto:service@smartygrants.com.au) Phone: (03) 9320 6888 Support Desk Hours: 9:00am - 5:00pm AEST (Monday - Friday).

### Eligibility criteria

To be eligible for funding:

1. Applicants must be a Victorian Local Government Authority (LGA).
2. Applicants must provide evidence of appropriate insurance as outlined in the Funding Guidelines.

**Please confirm you meet the eligibility criteria outlined above? \***

Yes - eligible to apply

No - ineligible to apply

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### Previous TAC funding

**Has your organisation received TAC funding for a VMS in the last 3 years? \***

Yes  No

**Please provide details of how much funding was received and when. \***

Word count:

Must be no more than 75 words.

**You are ineligible to apply for this grant program.**

Please review your answers above or contact the TAC Road Safety Grants Team [lgagrants@tac.vic.gov.au](mailto:lgagrants@tac.vic.gov.au) to discuss your application.

### Local Government Area (LGA) Details

\* indicates a required field

**Name of LGA \***

**How is your LGA classified? \***

**Name of LGA (if it differs from the one selected above)**

Organisation Name

**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
ABN status
Entity type
Goods & Services Tax (GST)

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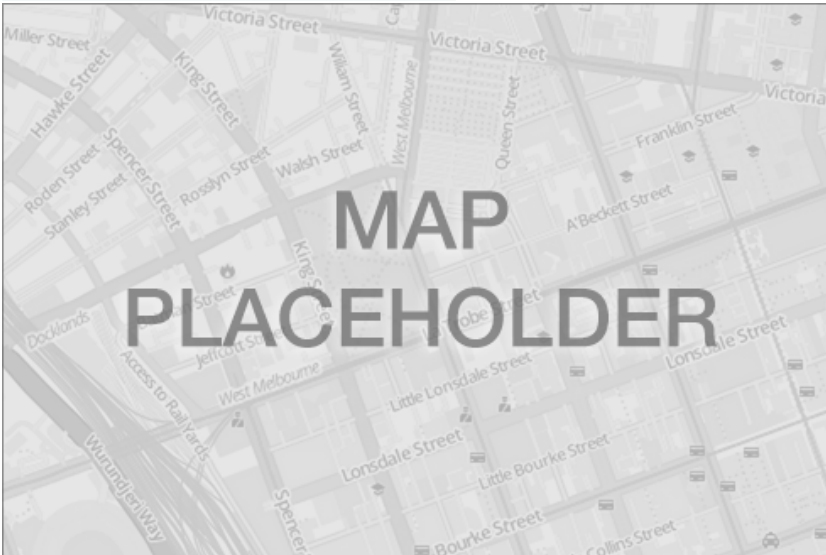
DGR Endorsed  
ATO Charity Type  
ACNC Registration  
Tax Concessions  
Main business location

[More information](#)

Must be an ABN.

### LGA address \*

Address

NOTE - When entering address, use drop down function to select address, do not manually enter. Address must be a street address, not PO Box. Map pin can be moved to find location.

### Primary project contact person

#### Name \*

First Name

Last Name

#### Position \*

#### Phone number \*

Must be an Australian phone number.

#### Email address \*

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Must be an email address.

### Secondary project contact person

**Name \***

First Name

Last Name

**Position \***

**Phone number \***

Must be an Australian phone number.

**Email address \***

Must be an email address.

### Child Safe Standards

The [Social Services Regulator \(SSR\)](#) is an independent statutory authority that exists to safeguard the rights of children and young people as well as people who use social services in Victoria.

**Will your project involve children and/or young people? \***

Yes

No

**Does your Council have Child Safe Standards? \***

Yes

No

We may require evidence of this if successful.

## Criterion 1 - Improving local community road safety and Safe System alignment (30%)

\* indicates a required field

Questions in this section will be assessed against Criterion 1.

Press **maximise** to see boxes or tables in full. Remember to press **save** regularly.

### Project need and community beneficiaries

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**What is the title of your project? \***

**What is the local road safety issue you have identified? \***

Word count:

Must be no more than 100 words.

**Please provide a brief description of your project. \***

Word count:

Must be no more than 50 words.

Provide a short description (100 words recommended) of your project - what are you out to do?

**Please upload evidence that demonstrates the need for this project. \***

Attach a file:

Documents may include reports, photographs/ images, letters of support or other items. Maximum 25MB, recommended size no bigger than 5MB.

## Project location

**Select which area/s that apply to the project location. \***

- |   |  |
|---|--|
| <input type="checkbox"/> Activity Centre      | <input type="checkbox"/> Remote - rural area         |
| <input type="checkbox"/> Metro area           | <input type="checkbox"/> School area                 |
| <input type="checkbox"/> Public transport hub | <input type="checkbox"/> Shopping Precinct           |
| <input type="checkbox"/> Regional City        | <input type="checkbox"/> Other: <input type="text"/> |

Regional Town

Multiple selections permitted

## Schools

List schools whose community may benefit from the project. These may include students, teachers, parents, carers and other stakeholders.

**School name**

**School address**

School name	School address
<input type="text"/>	<input type="text"/>

## Project objectives and outcomes

**How does your project align with Safe System principles and address the road safety issue or need you have identified? \***

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Word count:

Must be no more than 75 words.

Include a summary of who this project is for and how you will address the identified road safety issue or need.

**What are the objectives and anticipated outcomes of your project? \***

Word count:

Must be no more than 100 words.

## Criterion 2 - Project delivery (30%)

\* indicates a required field

Questions in this section will be assessed against Criterion 2.

Press **maximise** to see boxes or tables in full. Press the **add more** or **+button** to add more rows. Remember to press **save** regularly.

### Project plan

#### Project start and end dates

Enter the expected start and end dates for your project.

Please be as accurate as you can be when nominating the dates. If your application is successful, these dates will be used by the TAC to determine the payment schedule for the grant (for example, your final report will be due 1 month after the project end date and the final payment scheduled approximately 1 month later).

Note that all project activities, deliverables, and outcomes need to be achieved/completed between **1 March 2027 and 1 March 2028**.

Project start date \*

Must be a date and between 1/3/2027 and 1/3/2028.

Project end date \*

Must be a date and between 1/3/2027 and 1/3/2028.

#### Project activity

Describe the activities to be undertaken as part of this project, who is responsible for delivery and when it will be completed.

Some examples include, but are not limited to: finalise deployment plan; purchase VMS; deploy VMS; and, other activities.

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Project Activity	Responsibility	Completion Date
		Must be a date between project start and end date

### Project deliverables

VMS Type	Quantity
	Must be a number.
Other:	

### Messaging and deployment

You are required to upload a messaging and deployment plan to show the VMS initiative's road safety focus and movement. It is understood that plans may be subject to change.

Please refer to the VMS placement and usage considerations outlined in the Funding Guidelines and any requirements outlined by [Transport Victoria regarding VMS placement](#).

The TAC has developed [Variable Message Sign Deployment & Messaging Guidelines](#) to support LGAs with VMS road safety initiatives. The messaging covers a range of road safety areas and driver behaviours and aligns with current TAC public education campaigns. We recommend that you refer to the messages TAC has developed, to ensure a consistent and coordinated approach to messaging throughout the state.

**Please attach a copy of your messaging and deployment plan. \***

Attach a file:

### Risk management

**Do you have a risk management plan for your project? \***

Yes

No

Please list the top 3 or 4 risks that may be associated with the delivery of this project and how you would manage these.

Risk	Level of impact	How will this be managed?
		Must be no more than 25 words.

**Please attach a copy of your Risk Management Plan. \***

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Attach a file:

### Monitoring and evaluation

**Do you have a Monitoring and Evaluation Plan for your project? \***

Yes  No

**Please attach a copy of your Monitoring and Evaluation Plan \***

Attach a file:

Maximum 25mb, recommended size no bigger than 5mb

**As you don't have a prepared Monitoring and Evaluation Plan, please outline how you will monitor whether the anticipated project objectives and outcomes are being met? \***

Word count:

Must be no more than 75 words.

For example: evaluation design approach; methods; types of data that will be collected and analysed etc.

## Criterion 3 - Community engagement and partnerships (20%)

\* indicates a required field

Questions in this section will be assessed against Criterion 3.

Press **maximise** to see boxes or tables in full. Press the **add more** or **+button** to add more rows. Remember to press **save** regularly.

### Community engagement

**Please tell us about any community engagement activity undertaken in relation to this project to date. \***

Word count:

Must be no more than 75 words.

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**What are your next steps in terms of engaging the community? \***

Word count:  
Must be no more than 75 words.

**Do you have a Community Engagement Plan? \***

Yes  No

**Do you have evidence of community support for this project? \***

Yes  No

**Please attach your Community Engagement Plan \***

Attach a file:

Maximum 25mb, recommended size no bigger than 5mb

**Please attach any supporting documentation evidencing community support (e.g. letters of support etc) \***

Attach a file:

Maximum 25mb, recommended size no bigger than 5mb

## Partnerships

Please outline one or more partners and their role and responsibility in supporting delivery of your project (e.g. specific community groups, state government bodies, contractors etc).

**Partner**

**Role and responsibility**

Partner	Role and responsibility

## Criterion 4 - Budget (20%)

\* indicates a required field

Questions in this section will be assessed against criterion 5.

Press **maximise** to see boxes or tables in full. Press the **add more** or **+button** to add more rows. Remember to press **save** regularly.

**Note:**

- the total amount requested from TAC cannot exceed \$30,000 (ex GST)
- please list all amounts in this section exclusive of GST.

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### Project budget

Please provide a list of all anticipated project costs.

Be as specific as possible and only list one expense per line. For example: VMS device; community consultation; others.

If your application is successful, you must provide evidence of these expenses in your final report.

<b>Expenditure Item</b>	<b>Total Cost</b>	<b>Amount Requested from TAC</b>
List the expense item.	Must be a dollar amount.	Must be a dollar amount.
	\$	\$

### **Total project cost (ex. GST) \***

\$

This amount is calculated from the 'Cost' column in the table above.

### TAC funding request

### **Total amount requested from the TAC (ex. GST) \***

\$

This number/amount is calculated.

This amount is calculated from the 'Amount requested from TAC' column in the table above. It cannot be more than \$30,000 (ex. GST).

### Income

Please list all funding contributions being made to this project.

This includes the total amount requested from TAC, any other grant funding, co-contributions (e.g. Council financial contribution, schemes etc.) and in-kind support (e.g. volunteer time and its value).

<b>Income source</b>	<b>Contribution/ income type</b>	<b>Contribution/ income amount (ex. GST)</b>
List who is contributing to this income (e.g. Council, TAC, volunteers etc.)		
		\$

### **Total income amount (ex. GST)**

\$

This amount is calculated from the 'contribution/ income amount' column in the table above. This amount should also balance with the 'total project cost' calculated and presented earlier on this page.

### VMS quote

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Please provide a VMS quote to support your funding request.

Within this grant program, there is a preference for funding VMS with radar capability. Data obtained through VMS with radar capability can help to understand speed activity better and inform future initiatives.

### **VMS Quote \***

Attach a file:

## Terms and Conditions

\* indicates a required field

### Insurance

You indicated in the eligibility section that your organisation has the adequate insurances to support this project.

The TAC may request copies of these if your application is successful.

These include:

- Professional indemnity insurance - \$1,000,000.00
- Public liability insurance - \$5,000,000.00
- Workers compensation insurance under the applicable legislation
- Personal accident insurance to cover any risks in relation to the project.

## Privacy Collection Statement

Any personal information collected as a part of this application will be used by the TAC to decide whether to provide you with a TAC Local Government Grant, and to communicate with you about your application and the grant assessment process. As a part of the grant process, your information may be assessed by a panel of subject matter experts from the TAC and from its key Road Safety Partners.

If you do not provide all or part of the information requested, the TAC may not be able to progress your application. You can gain access to the information you have provided on this form by contacting the TAC Road Safety Grants Team at [rsgrants@tac.vic.gov.au](mailto:rsgrants@tac.vic.gov.au).

## Privacy Policy

The TAC is committed to protecting your privacy. Any personal information collected, handled, stored or disclosed about you through our online services will be managed in accordance with the *Transport Accident Act 1986*, *Privacy and Data Protection Act 2014* and the *Health Records Act 2001*.

To view the TAC's Privacy Statement, click [here](#).

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### Declaration

I state that the information in this application and attachments is to the best of my knowledge true and correct. I will notify the TAC of any changes to this information and any circumstances that may affect this application. I acknowledge that the TAC 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 this is an application only and may not necessarily result in funding approval. I have read and agree to the Terms and Conditions.

**I have read and agree: \***

Yes

**Name \***

Title      First Name      Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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**Position \***

**Phone Number \***

Must be an Australian phone number.

**Email \***

Must be an email address.

**Date \***

Must be a date.

### Applicant feedback

**We appreciate and welcome any feedback you have on the grant program or application process.**