

SLRSP Innovative Projects Application Form

Form Preview

SLRSP Innovative Projects Application Form - Introduction

* indicates a required field

The TAC, in partnership with the Department of Transport and Planning, have developed the Safe Local Roads and Streets program to support the development and delivery of road safety infrastructure projects on local roads.

This \$200 million program is designed to integrate local governments' priorities with a Safe System approach.

The program will run from July 2023 to June 2027. Over this time, we'll work with all Victorian local governments to plan, design and deliver \$200 million of safety improvements on the highest-risk local roads, intersections and precincts, such as schools.

*** This specific grant round is for "Innovative Projects" which (subject to approval) may be provided with funding over and above the nominal \$2 million amount allocated to each LGA as part of this program. Projects which are innovative in nature (i.e. design, delivery approach, potential provision of valuable learnings and insights) may be considered under this round of the SLRSP.**

**** Please refer to separate funding round/s for projects which would fall under the nominal \$2m allocation per LGA.**

Project applications will require:

- Preliminary designs
- Cost estimates and associated details
- Alignment to sound research and/or established road safety design principles and safety treatments
 - [VicRoads Safe System Assessment Guidelines](#)
 - [Austroads Safe System Assessment Framework](#)

Local Government Authority (LGA)

Nominate the LGA to which this project application applies

LGA *

Note that only LGA's in the dropdown list are eligible to apply for this round

Eligibility criteria

To be eligible to apply for this grant program you must be an authorised representative of a Local Government Authority.

Please confirm which of these applies *

- ☐ Direct employee of an LGA authorised to apply for this grant

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☐ Employee of a consulting firm authorised by the relevant LGA to apply for this grant
Your response to this question will determine contact information requested in the Contacts section of the application

You must be authorised by the relevant LGA to apply for this grant program.

Please review your answers above or contact the TAC Road Safety Team
slrsp@tac.vic.gov.au to discuss your application.

Contact Details

* indicates a required field

Authorised Consultant

Project Design Contact *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Organisation Name *

Organisation Name

Organisation Name

Project Design Contact Primary Email *

Must be an email address.

Project Design Contact Mobile Phone Number *

Must be an Australian phone number.

Applicant Details (LGA)

Applicant *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

The Applicant is the relevant LGA

Applicant Office Address *

Address

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

Applicant Position *

Applicant 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)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Applicant Office Phone Number *

Must be an Australian phone number.

Applicant Mobile Phone Number *

Must be an Australian phone number.

Applicant Email *

Must be an email address.

Applicant Primary Website

Must be a URL.

LGA Secondary Contact

Please provide details of a LGA secondary contact for this project application

Applicant Project Contact

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Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Applicant Project Contact Position

Applicant Project Contact Primary Email

Must be an email address.

Applicant Project Contact Mobile Phone Number

Must be an Australian phone number.

Project Summary

* indicates a required field

Project Title *

Word count:

Must be no more than 15 words.

Generally project name would include a road name or intersection plus the main treatment. eg. "x and y street roundabout".

Project/Problem description *

Must be no more than 200 words.

Provide a short description (100 words recommended) of your project. Describe the problem you're trying to address. For example, "there is a high crossing demand between the library and shops, but the volume and speed of traffic make it difficult for pedestrians to cross the road safely."

Movement and Place Classification

What Movement Category number/s best apply to the location/s of the project? *

- ☐ 1 - Mass movement of people and/or goods on routes with a State or National level movement function or primary access to a State level place
- ☐ 2 - Significant movement of people and/or goods on routes connecting across multiple municipalities or primary access to Regional level places.
- ☐ 3 - Moderate movement of people and/or goods on routes connecting municipalities or primary access to Municipal level places.
- ☐ 4 - Movement of people and/or goods within a municipality
- ☐ 5 - Local movement

At least 1 choice must be selected.

What Place Category number/s best apply to the location/s of the project? *

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- ☐ 1 - Place of State or National significance
- ☐ 2 - Place of Regional significance
- ☐ 3 - Place of Municipal significance
- ☐ 4 - Place of Neighbourhood importance
- ☐ 5 - Place of Local importance

At least 1 choice must be selected.

What category below best applies to the location/s project *

- ☐ Activity Streets ☐ City Places ☐ City Streets ☐ Connectors ☐ Local Streets and Boulevards

Select one only

Select which area/s applies to the project location *

- ☐ Activity Centre ☐ Metro area ☐ Public transport hub ☐ Regional City ☐ Regional Town ☐ Remote - rural area ☐ School area ☐ Shopping Precinct

Other

Select which areas applies to the project - multiple selections permitted

Description of the area

Provide any other information to describe the area, location, traffic conditions or road users that may be relevant to the project assessment.

Target Road User

Select the Target Road User/s *

- ☐ Cyclists (non-powered)
- ☐ Drivers/Passengers
- ☐ Powered Two Wheelers
- ☐ Pedestrians

Multiple selections permitted

Pedestrian type details

What type of Pedestrians will benefit from this project? *

- ☐ Non specific
- ☐ Elderly
- ☐ Parents/Carers
- ☐ Public Transport Commuters
- ☐ Recreational
- ☐ Students - Primary
- ☐ Students - Secondary
- ☐ Students - Tertiary
- ☐ Other:

Multiple selections permitted

Cyclist type details

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What types of cyclists will benefit from this project? *

- ☐ Commuters
- ☐ Courier/Delivery
- ☐ Recreational
- ☐ Scooters (non powered)
- ☐ Students - Primary
- ☐ Students - Secondary
- ☐ Students - Tertiary
- ☐ Other:

Multiple selections are accepted

Motorcyclist type details

What types of Powered Two Wheel vehicles will benefit from this project? *

- ☐ Courier/Delivery
- ☐ E-Bikes
- ☐ E-Scooters
- ☐ Motorcycles
- ☐ Other:

Driver/Passenger type details

What types of drivers/passengers will benefit from this project *

- ☐ Bus
- ☐ Courier/Delivery
- ☐ Heavy Commercial
- ☐ Light Commercial
- ☐ Private passenger vehicles
- ☐ Taxi/Uber
- ☐ Other:

Multiple selections permitted

SLRSP Schools

Based on responses to the questions above, you have indicated that the project may provide some benefit to school students or a school community.

List the schools whose community (students, teachers, parents, others) may benefit from this project.

Scope Details

All designs will be reviewed as part of the TAC SLRSP assessment process.

Designs should:

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- Clearly define the location/extent of where the treatment/s will be installed and provide road name/s and sections (mid-block and intersecting roads) where suitable.
- Be supported by photos of the existing environment/location where the treatment/s will be installed.
- Be supported by road user volume studies such as traffic counts where applicable.
- Successful applicants will be required to submit finalised designs at the progress report stage (before construction) for review and approval by the TAC.

Description of the project scope *

Must be no more than 200 words.

Describe three things you want the project to achieve in terms of benefits for participants and/or others (200 words recommended)

Assumptions *

Must be no more than 500 characters.

What assumptions have you made in proposing this project?

Constraints *

Must be no more than 500 characters.

What factors could constrain you e.g. approvals, permits, materials, resources, seasonal factors etc.?

Upload any design documentation/drawings

Attach a file:

Project Deliverables

SLRSP Deliverables

This section of the application form will be used to capture a measure for the scope of the project to ensure that the final delivery is in line with the approved project.

Treatment Type	Quantity	Unit of Measure
	Must be a number.	

Speed Limit Change Information

Respond only if a speed limit change treatment is selected as a treatment

Current Speed Limit (km/hr)

New (proposed) speed limit (km/hr)

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Must be a number.
km/hr speed limit

Must be a number.
km/hr

Innovation

Briefly describe the innovative nature of the project

Consider what aspect/s of the project are innovative. (e.g. innovative treatment or delivery method, trial of new treatment type which may deliver valuable learnings etc.).

Location Details

* indicates a required field

Location Information

Do you have road user volumes/traffic counts *

- ☐ Yes
☐ No

If yes you will be asked to provide further information

Use the table below to assist with outlining road user volumes (i.e. Traffic Counts)

Data Source	Road User Volume
i.e. Pedestrian observation count over 5 hours	

Alignment to Victorian Road Safety Strategy 2021-2030 and Safe System principles.

* indicates a required field

Alignment to Victorian Road Safety Strategy 2021-2030 and Safe System principles.

The application should demonstrate the alignment with the [Victorian Road Safety Strategy 2021-2030](#) and Safe System principles.

Projects will need to demonstrate alignment with Safe System principles, for example by implementing treatments that:

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- physically separate vulnerable road users from vehicles or, where this is not possible, limit potential crash speeds to not more than 30 km/h
- limit vehicle speeds at intersections to not more than 50 km/h
- reduce vehicle speeds in high speed environments to 80 km/h or below
- reduce the likelihood of vehicles colliding with fixed roadside objects in high speed environments, or reduce the severity of impact.

Safe System alignment

How will your project virtually eliminate the potential for serious injury for the crash type being addressed? Explain how it will reduce the severity of crashes to a survivable level or how will it reduce impact speeds to below the relevant Safe System threshold speed for injury. *

Word count:

Must be no more than 300 words.

Integration with council road safety initiatives

How does your project integrate or align with other council road safety or active transport initiatives? *

Word count:

Must be no more than 150 words.

For example, council pedestrian and cyclists programs, projects or strategies.

Council Approvals

Is there any internal Council Approvals required before this project can proceed?

- ☐ Yes
☐ No

Council Approvals

Please clarify any internal approvals which may be required, broadly explain process and timeframe.

Crash History and Benefits

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* indicates a required field

Crash History

Is there a crash history at the location/s where treatment/s are proposed? *

- ☐ Yes
☐ No

Crash History

Describe crash history

Describe problems/issues, crash summary and crash trends (refer to attached crash diagram, where used). Where crash history is not used, include other evidence (eg. IRR scores).

Crash Diagram

Attach a file:

Crash History

Do you have crash history data (FSI)

- ☐ Yes
☐ No

Crash History Period

Please provide details of the most recent 5 year crash history.

What is the start date for the crash history *

Must be a date.

What is the end date for the crash history *

Must be a date.

Crash and People FSI

What is the number of crashes with a fatality over the period specified? *

Must be a number.

What is the number of People Fatalities over the period specified? *

Must be a number.

What is the number of crashes with Serious Injuries over the period specified *

Must be a number.

What is the number of People Serious Injuries over the period specified *

Must be a number.

Total Crash FSI

Total People FSI

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This number/amount is calculated.

This number/amount is calculated.

Crash Other

Must be a number.

People Other

Must be a number.

Other Risk evidence

Provide any other evidence and/or commentary on the crash/safety risk at the proposed location/s

For example, AusRAP star ratings, IRR scores, SSA scores, evidence of speeding, high levels of VRU activity, etc.

Project Life Span

Project Life Span (Years)

Must be a number.

The number of years that the project/infrastructure will provide the benefits

Crash Reduction Factor

Is the Crash Reduction Factor (CRF) known? *

☐ Yes

☐ No

Benefits Profile

Crash Reduction factor %

Must be a number.

(See CRF list provided)

If the CRF has not been sourced from the list provided, please indicate the alternate source and the rationale.

FSI (People) saved over project life span

Must be a number.

This is the lives saved over the useful life of the project (e.g. life of the infrastructure to be delivered)

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Financial Details and Schedule

* indicates a required field

Project Costs

All project applications must be accompanied by a detailed cost estimate.

Total funding requested in this application *

\$

Must be a whole dollar amount (no cents).
(This MUST include any on-costs and contingency)

Contingency Allowance

\$

Must be a dollar amount.

Cost Estimate

Please attach detailed cost estimate and any additional evidence to support your project budget request.

Attach a file:

E.g. quotes, letters of support for co-contributions etc.

Co-Contribution

Will ADDITIONAL funding be provided by the LGA or other source of funding? *

- ☐ Yes
☐ No

Is there a separate funding source (ie provided directly by the LGA)

Co-Contribution amount

How much funding in ADDITION to that being requested will be provided to complete the project

\$

Must be a dollar amount.

Co-contribution amount in addition to that being requested in this application

Further project cost information

Contingency Rationale

Please describe the rationale for proposed contingency listed in the Financial analysis – this project section of this form. This should reference any High or Very High Rated Risks and Issues that could impact the project's ability to deliver its intended benefits

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What innovative measures have you considered to reduce project costs and/or increase safety aspects?
*

Word count:

Must be no more than 200 words.

For example, design choice, materials used etc.

Project Benefits

Cost per FSI Reduction

This number/amount is calculated.
Calculated from TEC/FSI saved

Benefit Cost Ratio

Must be a number.

Project Schedule

Please provide a broad outline of the proposed project schedule by completing the dates below. Note that completion dates may be linked to payments and monitoring of schedule adherence.

Detailed Design Phase

Period from the start of the detailed design process through to the final approval of the design (applicant should allow a minimum of 2 weeks for final approval)

Detailed Design Start Date

Must be a date.

Detailed Design Completion Date

Must be a date.

Pre-construction Phase

This period will include all pre-construction activities such as procurement and mobilisation.

Pre-construction Start Date

Must be a date.

Pre-construction End Date

Must be a date.

Construction Phase

This should include the period from the physical start date through to the practical completion of the project.

Construction Start Date

Must be a date.

This should include the period from the physical start date through to the practical completion

Construction End Date

Must be a date.

Project Finalisation Phase

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This phase should include the period to complete all finalisation activities such as handover and final reporting.

Project Finalisation Start Date

Must be a date.

Project Finalisation End Date

Must be a date.

Risk Management

* indicates a required field

Risk Register

List all of the identified risks that may be associated with the delivery of your project.

Risk	Level of impact	How will this be managed?

Do you have a Risk Management Plan for your project? If you answer yes, you will be asked to attach a copy in the next question. *

- ☐ Yes
☐ No

Risk Management Plan

Please attach a copy of your Risk Management Plan.

Attach a file:

Maximum 25mb, recommended size no bigger than 5mb

Environment and Cultural Heritage

Is there any Environment or Cultural Heritage overlays which may effect this project?

Is there any Environment or Cultural Heritage overlays which may effect this project?

- ☐ Yes
☐ No

Environmental and Cultural Heritage *

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Word count:

Must be no more than 300 words.

Summarise any known risks or issues, identify any permits and summarise process required

Upload any Environmental or Cultural Heritage reports that may have been conducted which relate to the location of this project

Attach a file:

Existing Services (underground/overhead)

Is there any services which may impact on the delivery of this project? *

- ☐ Yes
☐ No

Upload plan/s (e.g 'Dial Before You Dig') of the service locations

Attach a file:

Has the cost impact (e.g relocation or protection) of these services been factored into the cost estimate provided in the Project Cost section of this form?

- ☐ Yes
☐ No

Please ensure all costs associated with any existing services have been included in the Project Costs before submitting this application

Capacity to deliver

*** indicates a required field**

Project Delivery

Demonstrate the capacity to implement and/or source expertise to manage the delivery of the project, including fulfilling contractual reporting requirements and measuring project impact

Which organisation is responsible for delivery of the project?

- ☐ This project will be delivered by The Department of Transport and Planning (DTP)
☐ This project will be delivered by the LGA

Project Delivery Contact

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Project Delivery Contact

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Organisation

Organisation Name

Project Delivery Contact Position

Project Delivery Contact Primary Address

Address

Project Delivery Contact Primary Email

Must be an email address.

Project Delivery Contact Primary Website

Must be a URL.

Project Delivery Contact Mobile Phone Number

Must be an Australian phone number.

Capacity

Provide details of the LGA's capability/capacity to manage the delivery of the project. *

Word count:

Must be no more than 200 words.

Provide an overview of how the delivery of the project will be managed. In the case of projects delivered directly by the LGA, how will the project be managed and how will contractual reporting requirements be fulfilled.

Insurance

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

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

If available, upload adequate certificates of currency to support your application.

These include:

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

Please attach Certificates of Currency

Attach a file:

Maximum 25mb, recommended size no bigger than 5mb

Comms and Engagement

* indicates a required field

Community engagement and sentiment

Please include information about the specific community groups you have engaged, or plan to engage (e.g. schools, traders, local bike groups, residents and community impacted by the project).

Your response should demonstrate community support for the project.

If you foresee any potential community objection to the project, please discuss and outline how you would address this.

Provide evidence of community engagement to be undertaken or that has been undertaken and community support for the project

Stakeholder Engagement and Comms Approach *

Detail any community engagement, consultation and sentiment regarding your project. *

Must be no more than 250 words.

Outline any recent community engagement that may be relevant to the project

Please attach any supporting documentation (e.g Community engagement plan, letters of support etc.)

Attach a file:

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Maximum 25mb, recommended size no bigger than 5mb

SLRSP Stakeholders

Identify major stakeholders (name/organisation)

Please include a description of the stakeholder where it may not be clear from the name/organisation.

Stakeholder

Terms and conditions

* indicates a required field

Privacy policy

Any personal information collected as a part of this application will be used by the TAC to assess the application's suitability to the Safe Local Roads and Streets Program and to communicate with you about your application and the assessment process. As a part of the process, your information may be assessed by a panel of subject matter experts from the TAC and from its key Road Safety Partners.

Declaration

I state that the information in this application and attachments is to the best of my knowledge true and correct. I will notify 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 and comment.

I understand that this is an application only and may not necessarily result in funding approval.

Name *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Position *

Date of acceptance *

Must be a date.

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Local Government Authority of Applicant

LGA /Applicant

Applicant feedback

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