

2026 Greener Neighbourhoods Grant Application Form

Form Preview

About the Grant

* indicates a required field

Program Details

Grant Program Name

This field is read only.

The program this submission is in.

Through the Greener Neighbourhoods program, the NSW Government is providing funding to 43 councils across Greater Sydney, Hunter-Central Coast and Illawarra-Shoalhaven regions to improve councils' ability to strategically plan for and manage their urban forests.

The 2026 Greener Neighbourhoods grant round is targeted and non-competitive. Up to \$2.58 million in total funding is available.

Applications must be completed using this platform.

Please refer to the [grant guidelines](#) when completing this application.

Key information:

- Applications are due by **Friday, 21 August 2026 at 5:00pm**.
- There is a maximum grant amount of \$60,000 (excl. GST) per council
- Councils can submit one application only.
- Cash and in-kind contributions from council are encouraged (not mandatory)
- Projects have an 18-24 month timeframe to complete.
- Successful applicants will be required to complete milestone reports for their project.
- General Manager / CEO endorsement is required for the project to be considered.

Questions?

Contact the Green and Sustainable Cities by email: gocgrants@planning.nsw.gov.au

Instructions for Applicants

Before completing this application form, ensure you have read the [program guidelines](#).

Follow the instructions below when completing the application form:

- Incomplete applications and/or applications received after the closing date will not be considered.
- The navigation panel on the right-hand side of the screen allows users to move freely between application sections, meaning sections can be completed in any order.

2026 Greener Neighbourhoods Grant Application Form

Form Preview

- If you wish to save a draft of your application form and come back to it, please click 'save and close'. You can return to complete your application form through the 'My Submissions' option.
- Please save your responses regularly while completing the application. The online form has an automatic time out every 20 minutes.
- Once submitted, your form cannot be changed.
- To submit your application, all required questions (marked with an asterisk *) must be completed.

Application Number

This field is read only.

Disclaimer

The Applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted, and the Department expressly reserves its right to accept or reject this application at its discretion;
- it must bear the costs of preparing and submitting this application and the Department does not accept any liability for such costs, whether or not this application is ultimately accepted or rejected; and
- it has read the Funding Guidelines for the Program and has fully informed itself of the relevant program requirements.

Use of Information

By submitting this application form, the Applicant acknowledges and agrees that:

- if this application is successful, the relevant details of the project will be made public, including details such as the names of the organisation (Applicant) and any partnering organisation (state government agency or non-government organisation), project title, project description, location, anticipated time for completion and amount awarded;
- the Department will use reasonable endeavours to ensure that any information received in or in respect of this application which is clearly marked 'Commercial-in-confidence' or 'Confidential' is treated as confidential, however, such documents will remain subject to the Government Information (Public Access) Act 2009 (NSW) (GIPA Act); and
- in some circumstances the Department may release information contained in this application form and other relevant information in relation to this application in response to a request lodged under the GIPA Act or otherwise as required or permitted by law.

Privacy Notice

2026 Greener Neighbourhoods Grant Application Form

Form Preview

By submitting this Application form, the Applicant acknowledges and agrees that:

- the Department is required to comply with the Privacy and Personal Information Protection Act 1998 (NSW) (the Privacy Act) and that any personal information (as defined by the Privacy Act) collected by the Department in relation to the program will be handled in accordance with the Privacy Act and its privacy policy (available at: <https://www.dpc.nsw.gov.au/privacy>);
- the information it provides to the Department in connection with this application will be collected and stored on a database and will only be used for the purposes for which it was collected (including, where necessary, being disclosed to other Government agencies in connection with the assessment of the merits of an application) or as otherwise permitted by the Privacy Act;
- it has taken steps to ensure that any person whose personal information (as defined by the Privacy Act) is included in this application has consented to the fact that the Department and other Government agencies may be supplied with that personal information, and has been made aware of the purposes for which it has been collected and may be used.

Eligibility Confirmation

Please declare this application meets the Program eligibility criteria:

- The grant funding amount sought is up to \$60,000 (excl. GST) per council.
- The project meets one or more of the program objectives.
- Funding is sought for eligible project costs.
- Projects must be completed within 24 months of executing the funding deed or by 30 November 2028.
- Adequate insurances including public liability insurance cover of \$20 million.
- The application is approved by the General Manager or equivalent senior council delegate.

I confirm that the applicant and project are eligible according to the criteria outlined in the Program Guidelines *

☐ Yes

Applicant Details

* indicates a required field

Organisation Details

Organisation Name *

Organisation Name

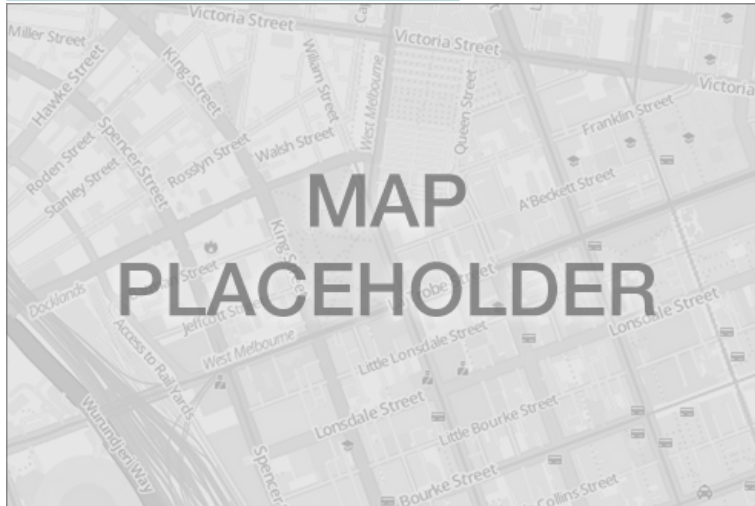
For organisations: please use the organisations full name. Make sure you provide the same name that is listed in official documentation such as that with the ABR, ACNC or ATO.

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Applicant Primary Address *

Address



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

Applicant Postal Address

Address

Applicant Primary Phone Number *

Must be an Australian phone number.
Country code not required, area code for landlines is required.

Applicant Email Address *

Must be an email address.

Applicant Website

Must be a URL.

Does the applicant have an Australian Business Number (ABN)? *

☐ Yes ☐ No

Applicant ABN *

2026 Greener Neighbourhoods Grant Application Form

Form Preview

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.

Primary Contact Details

Primary Contact *

Title	First Name	Last Name

This is the person we will correspond with about this grant.

Primary Contact Position *

e.g., Manager, Board Member or Fundraising Coordinator.

Primary Contact Phone Number *

Must be an Australian phone number.

Country code not required, area code for landlines is required.

Primary Contact Other Phone Number

Must be an Australian phone number.

Country code not required, area code for landlines is required.

Primary Contact Email *

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

Secondary Contact Details

Secondary Contact *

Title	First Name	Last Name
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2026 Greener Neighbourhoods Grant Application Form

Form Preview

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Applicant Project Contact Position *

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Applicant Project Contact Primary Phone Number *

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Must be an Australian phone number.

Applicant Project Contact Primary Email *

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Must be an email address.

Executive Sponsor

Please provide the name and position of the Executive Sponsor of this project (Director or above)

Executive Sponsor *

Title	First Name	Last Name
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Position *

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Primary Phone Number *

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Must be an Australian phone number.

Primary Email *

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Must be an email address.

Insurance Details

If successful, Council must hold and maintain the following insurance policies for the duration of the project:

- (i) workers compensation insurance as required by Law for all persons involved in the delivery of the Project;
- (ii) public liability insurance to the value of not less than \$20 million in respect of each and every occurrence and unlimited in the aggregate for any one period of cover; and
- (iii) insurance over all Assets used in connection with the Project funded or partly funded by the Funding, for their full replacement value.

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Does your organisation currently hold, or is it willing to obtain and maintain for the duration of the project, required insurances, including workers compensation, \$20 million public liability, and full replacement value for project assets? *

- ☐ Yes
- ☐ No, but willing to obtain
- ☐ No

Please provide evidence that the applicant organisation holds the required insurances. *

Attach a file:

Project Details

*** indicates a required field**

If successful, this section will be used to populate information on the NSW Grants and Funding Finder website.

Title *

Word count:

Must be no more than 25 words.

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

Brief description *

Word count:

Must be no more than 50 words.

Include a brief summary of who will benefit from this initiative, what activities you will do and what outcomes you expect from your activities.

Anticipated start date *

Must be a date and no earlier than 2/11/2026.

The anticipated start and end dates should reflect your projects delivery timeframe.

Anticipated end date *

Must be a date and no later than 30/11/2028.

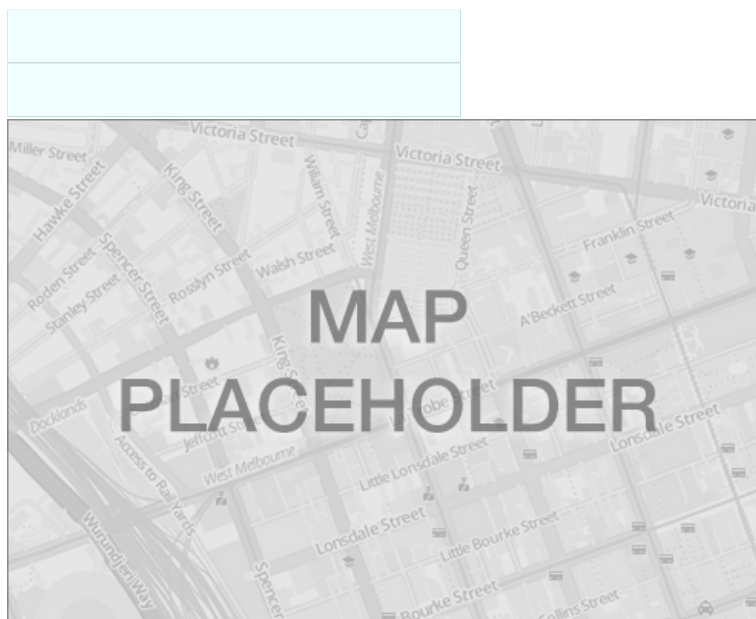
Projects need to be completed within 24 months of the execution of funding deeds.

Primary location of your initiative *

Address

2026 Greener Neighbourhoods Grant Application Form

Form Preview



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

Primary location does not need to be a specific address, and can be postcode, suburb, state (NSW), etc
If delivered online, please specify the area of focus for delivery.

Priority Areas

* indicates a required field

The three priority areas for the 2026 Greener Neighbourhoods grant program are:

- 1.Planning for canopy and urban heat** - build the strategic, data, and governance foundations needed to deliver urban greening and mitigate urban heat.
- 2.Maintaining canopy and green cover** - strengthen the management of trees as green infrastructure assets that deliver long term environmental and community benefits.
- 3.Collaborating on canopy and urban heat** - engaging the community and stakeholders in decision making and knowledge sharing.

Please select the program priority area/s for your project: *

- ☐ Planning for canopy and urban heat
- ☐ Maintaining canopy and green cover
- ☐ Collaborating on canopy and urban heat

At least 1 choice must be selected.

Applications only need to meet one program priority area, however your application may include activities for more than one of the objectives.

Select the category which aligns best to your project: *

- ☐ Community education and behaviour change

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Select the category which aligns best to your project: *

- ☐ Strategic planning instruments
- ☐ Data and evidence capability
- ☐ Canopy target setting

Select the category which aligns best to your project: *

- ☐ Managing trees as assets

Project Scope and Objectives

** indicates a required field*

Merit Criteria

The following questions will be used to assess the merit of your application.

Demonstrated need for the project

Describe the need for the project: *

Word count:

Must be no more than 200 words.

Project scope and deliverables

What does council want to achieve with the project? Please detail what will be delivered. *

Word count:

Must be at least 300 words.

Please provide a high level summary. More detail can be provided in the table below.

Demonstrated alignment with grant program objectives

The grant program objectives are:

- Prepare or update strategic plans that include tree canopy and/or heat mitigation targets and actions
- Improve access to, and capability in, analysing and applying tree canopy and urban heat data
- Develop locally appropriate tree canopy targets informed by climate risk, land use and community context
- Develop, update or maintain a tree asset database or tree asset management plan aligned with council asset management systems

2026 Greener Neighbourhoods Grant Application Form

Form Preview

- Deliver education and engagement programs that build understanding of the benefits of trees and urban greening for urban cooling and liveability.

In the table below, provide details on what councils want to achieve. Please align your project objectives with the overall program objectives and detail on the activities to achieve this.

Include only one objective per row. Add more rows if you want to list additional objectives. Please use the maximise button to expand the table.

Select the grant program o Detail your grant project o Activities to deliver the project

Project Outcomes

* indicates a required field

Merit criteria

The following questions will be used to assess the merit of your application.

What are the expected project outcomes and how will these be measured to determine the success of your project? *

Word count:

Must be no more than 150 words.

Further details will be requested in the next section.

Strategies for evaluating and measuring outcomes from the project

Please tell us about the outcomes you expect to achieve from your project.

Listing them here will allow you to track the progress and describe any qualitative and/or quantitative ways this will be achieved.

More specific project metrics can be added at the bottom of the page if needed.

Include only one outcome per row. Add more rows if you want to list additional outcomes. Please use the maximise button to expand the table.

Project outcomes

How will council track the progress?

Notes

What outcomes do you expect will occur as a result of your project? Please be brief. List one per row.	Please explain how council intends to track the progress of the outcome.	Add notes if you need to provide more context.

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Project metrics

If available, you may add your own metrics here to track the progress of your project.

Include only one metric per row. Add more rows if you want to list additional metrics. Please use the maximise button to expand the table.

Metric	Target	How will you collect your data?
One per row. Add more rows if you want to list additional metrics.	Include a metric for your target if appropriate. If this is not applicable for your project, then add a zero. Must be a number.	Add in any methods used to collect data.

Project Viability

* indicates a required field

Viability Criteria

The following question will be used to assess the viability of your application.

Project is well planned with appropriate risk management

Risks

Please detail any risks or uncertainties in the delivery of the project, and how each of these will be managed.

Please include only one risk per row. Add more rows if you want to list additional risks.

Please use the maximise button to expand the table.

Risk	Impact	Likelihood	How the risk will be managed
For example, you may require approval, have stretched resources, or time constraints for delivery.			You should provide an explanation of how you will prevent or treat the risk.

Project and budget are supported by council and stakeholders

General Manager (or equivalent) written endorsement is required for all projects:

- at the time of application; (attached below) or
- within one week of applications closing.

2026 Greener Neighbourhoods Grant Application Form

Form Preview

This endorsement can be an email, letter or memo.

The endorsement is to include:

- The 2026 Greener Neighbourhoods grant program, the proposed project name and the funding amount sought.
- Confirmation the project will be resourced appropriately.
- Reasonable efforts will be made to manage modern slavery risks and the project will be completed on time.

When will General Manager endorsement be provided? *

- ☐ Upload now and submit with application
- ☐ Via email within 1 week of submission of application

Please upload General Manager (or equivalent) endorsement of project in line with guidance above *

Attach a file:

A minimum of 1 file must be attached.

Budget Details

* indicates a required field

Value for money criteria

The following questions will be used to assess value for money for your application.

Realistic budget relative to the scale and impact of the project

While not a requirement, will your council include a cash and/or in-kind contribution to increase the value of the project in addition to the grant funding sought? *

- ☐ Yes
- ☐ No

You will be asked to provide detail on these contributions in the budget below.

Please provide details of the cash and/or in-kind contributions. *

Please detail any in-kind contributions the applicant will be making to the project.

Total project value, including co-contributions (cash and in-kind)

Project budget

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Complete the budget table below, outlining all project activities and associated costs. **This table will form the project plan, please ensure adequate detail is provided.**

Please use the maximise button to expand the table. To add extra rows, use the add more button.

Activity	Theme	Commencement date of activity	Completion date of activity	GN Grant funds	In-kind from Council	Funds from Council	Total
Must be no more than 15 words.		Must be a date and no earlier than 2/11/2026.	Must be a date and no later than 30/11/2028.	ex GST. Must be a dollar amount.	ex GST. Must be a dollar amount.	ex GST. Must be a dollar amount.	ex GST. This number/amount is calculated.

The following figures are calculated using the above project budget. If there are any discrepancies, please amend the budget.

Total Applicant Co-contribution *

\$

This number/amount is calculated.
What is the total monetary amount the applicant will be contributing to the project?

Co-contribution %

This number/amount is calculated.
Percentage applicant contribution to Total Amount Requested.

Total Project Cost *

\$

This number/amount is calculated.
What is the total budgeted cost (dollars) of your project?

Total Amount Requested *

\$

This number/amount is calculated.
What is the total financial support you are requesting under this grant?

Appropriate use of public funds

Does this project rely on other grant programs or funding sources apart from council? *

☐ Yes

2026 Greener Neighbourhoods Grant Application Form

Form Preview

☐ No

Please provide details including the program name, funding source, amount and the status of the application/project. *

Payment and Supporting Documents

* indicates a required field

Bank Details

Applicant Bank Account *

Account Name

BSB Number

Account Number

Must be a valid Australian bank account format.

Please provide a recent bank statement of the account you would use to receive the grant funding if you are successful. *

Attach a file:

This is a requirement to authorise payments using the Recipient Created Tax Invoice (RCTI).

You do not have to show transaction details, however, the statement must:

- Be for an account in the name of the applicant
- Clearly show the BSB, account number and name of the account holder
- Be a statement on financial institution letterhead
- Not be an online transaction list

Funding Deed

A draft funding deed is provided so applicants can understand the proposed funding terms and obligations before applying. Successful applicants will be required to enter into a funding agreement. Project milestones will be finalised at the time of funding being awarded. The Department may update the draft agreement before it is signed.

Please refer to the [Funding Deed Template](#).

☐ Do you acknowledge that the Funding Deed Template has been provided?

Supporting Documents

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Please attach and/or provide links to copies of plans, reports or any other documentation to support your application. Attach only relevant pages or sections, not reports in their entirety.

Documentation can include council plans/reports, project quotes, letters of support, project budget spreadsheet etc.

Please upload any documentation to support your application

Attach a file:

Please provide links to documents to support your application.

Declaration and Authorisation

* indicates a required field

Declaration

The Applicant represents and warrants that this application has been submitted by an authorised representative of the Applicant (e.g. CEO, Chief Financial Officer, General Manager, Director, Chair of the Board, President, authorised manager etc).

Where this Application is submitted in the course of employment by a representative of any kind (e.g. authorised representative or agent) of the Applicant, you: (i) acknowledge and agree that the Applicant is deemed to be jointly and separately bound by this application; and (ii) represent and warrant that you have the authority to represent and bind the Applicant as contemplated by this provision.

By submitting this application form I hereby declare that:

- I agree for my project to be automatically considered in other NSW funding programs;
- I have read and understood each of the acknowledgements, agreements, representations and warranties provided above, and that each of these are true and correct;
- All information provided including the responses to each question in the relevant sections of this application is true and correct to the best of my knowledge;
- Any information contained in this application may be disclosed to other Government agencies, staff administering the program, and to external stakeholders (including consultants, lawyers and other advisers) as part of the assessment of this application;
- I am authorised to submit this application on behalf of, and have the authority to represent and bind the Applicant;
- I understand that any false declaration may render this application ineligible/invalid; and
- All relevant conflicts of interest have been declared

2026 Greener Neighbourhoods Grant Application Form

Form Preview

Authorisation

I agree *

☐ Yes

Name of authorised person *

Title

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

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

Phone number *

Must be an Australian phone number.

We may contact you to verify that this application is authorised by the applicant organisation

Email *

Must be an email address.

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

How did you find the online application process?

☐ Very easy

☐ Easy

☐ Neutral

☐ Difficult

☐ Very difficult

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

Estimate in minutes i.e. 1 hour 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.

GMS-MGO/Locn/2025 v2.0