

Community Waste Disposal Assistance Scheme 2026/27

Form Preview

About Your Organisation

* indicates a required field

Organisation Details

Organisation Name *

ABN

Optional if auspiced

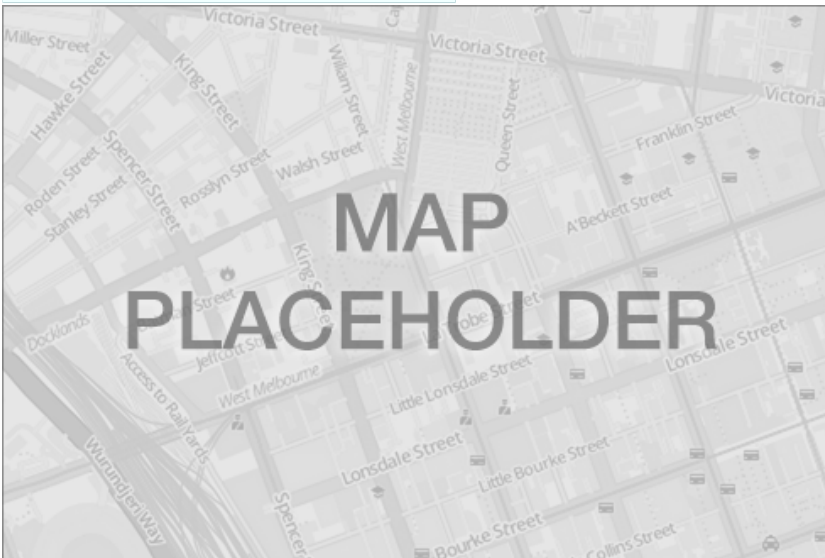
Are you incorporated? *

Yes

No

Address

Address



Contact Person *

Position/Role *

Phone Number *

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Must be an Australian phone number.

Email *

Must be an email address.

What is your organisations Community Service Exemption?

The Community Service Exemption ("CSE") is an exemption registered with the Environmental Protection Authority which provides charitable or not-for-profit organisations with an exemption from the NSW waste levy for eligible waste collected or received through community services or activities. We encourage you to consider whether your organisation may benefit from a CSE.

Auspecting Details

Auspecting Organisation Name *

Auspecting Organisation ABN *

Eligibility

* indicates a required field

Eligibility Check

Are you based in, or delivering the project within, Wingecarribee Shire *

- Yes
 No

You may not be eligible to apply if you are not based in, or delivering the project within, Wingecarribee Shire. Please review the guidelines.

Do you have any outstanding debts to Council? *

- Yes
 No

Organisations with outstanding debts are ineligible.

Prior Acquittals

Do you have any outstanding acquittals from any previous Council funding? *

- Yes
 No
 Not Applicable

Applications may be ineligible if acquittals are outstanding.

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Project Overview

* indicates a required field

Project Overview

Project Title *

What waste are you applying to have subsidised? What activities are generating the waste? *

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

What type of waste does your project involve?

- General
- Recycling
- Green
- Other:

Please estimate the weight of the materials your organisation anticipates disposing of at the Resource Recovery Centre.

Must be a number.

Please answer in kilograms. This helps us understand the scale of waste management needs and allocate accordingly for resource recovery efforts.

Start Date *

Must be a date and between 24/8/2026 and 30/6/2027.

End Date *

Must be a date and no later than 30/6/2027.

How will you ensure correct sorting and use of Moss Vale Resource Recovery Centre? *

Word count:

Must be no more than 200 words.

Will your project include community education or awareness about waste reduction? *

- Yes
- No

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Community Education

What community education or awareness will your project include? *

Word count:

Must be no more than 200 words.

Strategic Alignment

* indicates a required field

New Section

Which Wingecarribee 2035 goals or priorities does your project support? *

- Supporting Families & Young People
- Strengthening Partnerships & Collaboration
- Delivering Tangible Community Benefit
- Activating Community Spaces and Places
- Bringing Communities Together Through Vibrant Events
- Promoting Sustainability & Environmental Responsibility

Select all that apply.

Please explain in 2-3 sentences how your project contributes to these priorities. *

Word count:

Must be no more than 200 words.

Community Benefit

* indicates a required field

Who will benefit from your project? *

- Young People
- Families
- Older Residents
- General Community
- Other:

Estimated number of people who will directly participate/benefit. *

Must be a whole number (no decimal place).

How will you measure the success of your project? *

Word count:

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Must be no more than 100 words.

Budget (Core)

* indicates a required field

Project Budget (Expenditure)

Please outline your project expenses in the expenditure table below (GST inclusive).

| Expenditure description | Expenditure amount (budgeted) | Notes |
|---|---|--|
| Provide clear descriptions for each budget item. Examples of expenses could include 'onsite power & water for 6 months', 'office supplies', 'part-time staffer x 40 hours'. | Enter the total amount to be expended on this budget item. Must be a dollar amount. | Add notes if you need to provide more context. |
| | | |
| | | |
| | | |

Budget

Total Funding Amount Requested *

Must be a whole dollar amount (no cents) and no more than 15000.

Other Contributions

Cash, in-kind, volunteer hours

Upload your organisation's most recent income and expenditure statement. *

Attach a file:

Acknowledgement of Council Support

* indicates a required field

Acknowledgement of Council Support

How will you acknowledge Council support? *

Other:

Acknowledgement of Council support is mandatory and will be subject to Council approval.

Declaration

* indicates a required field

I declare that the information provided in this application is true and correct to the best of my knowledge and ability. *

Yes

I understand that if anything in my application is not true or correct I may have to return any funding provided in its entirety and may be prohibited from applying in future funding rounds. *

Yes

I understand funding is not guaranteed and applications are competitive. *

Yes