

Ministry for Transport, Infrastructure and Capital Projects

CALL FOR APPLICATIONS

Grant Scheme for the Implementation of Active Mobility or Citizen Engagement Measures by Local

Councils and Non-Government Organisations

APPLICATION FORM

CLOSING DATES FOR APPLICATIONS:

20th November 2022

No late applications will be accepted

Internal Use Only:

DATE:

REF:

SECTION 1: Applicant Details

Name of Applicant:	
Name of Local Council/ NGO:	
NGO Registration Number:	
Name of Contact Person:	
Position of Contact Person:	
ID Card No:	
Address of Contact Person:	
(for correspondence)	
E-mail:	
Work Contact Number:	
Mobile Contact Number:	
VAT No.	

SECTION 2: Application Details

Please indicate whether your application is being taken forward by one local council or a partnership of local councils by ticking the relevant box (one box only):

- □ Single applicant local council
- □ Partnership of two local councils
- □ Single applicant NGO
- □ Partnership of two NGOs
- □ Partnership of local council and NGO

In the case of a partnership application, a copy of the partnership agreement entered into by the NGO/s and/or the local council/s, signed by all members of the partnership, is to be attached to this application.

In case of a partnership application, details of the lead local council/NGO are to be provided below. Details of the partner local councils or NGO are to be included in Annex 1 of this application form.

Name of Local Council/NGO:	
Address of Local	
Council/NGO:	
Name of Contact Person:	
Position of Contact Person:	
ID Card No:	
E-mail:	
Work Contact Number:	
Mobile Number:	

PARTNERSHIP APPLICATIONS

Below please provide information about the partnership and outline the reasons for the creation of such partnership in taking forward the application.

These reasons should explain the benefits for each member of the partnership, and the benefits your partnership application will achieve in promoting and maximising the awarded grant.

SECTION 3: About the Measure/s

Please give the name of your proposal (the name should reflect the nature of the project):

Project Name:	

Please include a clear and concise description of the need/justification for the project.

Need/justification for the project:	

Below please provide background information, setting the scene for the proposed measure/s focusing on the project area, context particularities, challenges and how these can be addressed.

Below include details to better explain your proposal for the evaluation committee to understand how this is aligned to the scope of this initiative. Kindly include:

- The aims and objectives of your proposal (Clearly describe the objectives of the proposed measure/s and how this is aligned with the scope of the call)
- Details of how the measure/s will function (including how stakeholders will be engaged) and
- How does your proposal promote sustainable mobility

Kindly complete the below:

Is the measure innovative? Is	□ Innovative
something similar already in place, locally?	□Not innovative
The measure/s promotes (Tick all that apply)	□Walking
	□Multimodality
	□Citizen engagement
	Emissions reduction
Which theme/s does the measure/s contribute	□Environment
to? (Tick all that apply)	□Improved quality of life and liveability
	□Making the locality more attractive
	□Green transport
	□Less than 1000 individuals
What is the expected reach by the proposed measure/s?	□More than 1000 individuals
What is the target	Children
population group?	□Parents
(Tick all that apply)	□Employees working within the locality
	□Senior citizens
	□Mobility impaired
	□Tourists/visitors
List the mobility challenges	□1 - 2 challenges:
present in the locality and how will the proposed	□3 – 4 challenges:
measure/s address these	□5 or more challenges:
Challenge	How does the measure/s address this challenge?

Nature of the measure/s	□Temporary
Nature of the measurers	
Please provide details of	
the technical	
specifications and	
installation	
Please provide details of the	
implementation plan, including the obtainment of	
any permit, license or	
authorization from the	
relevant authorities including	
but not limited to the	
Planning Authority,	
procurement, contracting and	
leeway to cover for any	
delays.	
Please list the measure/s'	□1 - 2 targets:
targets	□3 – 4 targets:
(the goals or objectives that	□5 or more targets:
determine how the	
measure/s is expected to be	
done)	
Targets	
Please list the measure's/s'	□1 - 2 impacts:
measurable impacts	□3 – 4 impacts:
(direct or indirect effects	□5 or more impacts:
produced by the measure/s.	
These are to include the	
social, economic and	
innovation impacts)	
Impact	Measure of impact (quantitative and qualitative)

Kindly provide information on the geographical extent of the measure/s being proposed including the location where these will be implemented as well as the area of impact.



For measure/s involving infrastructural interventions, is the land/property where the proposed measure/s will be implemented owned by the applicant?

□ Yes □ No

If yes, please provide a copy(ies) of the proof of ownership, as Supporting Document C to the Application Form.

If no, please provide a copy(ies) of the third-party consent, as Supporting Document D to the Application Form.

Does the implementation of the measure/s require a planning permission or any other form of permitting?

- □ Yes
- 🗆 No

If yes, please list these permits in the box below and provide a copy(ies) of the relevant planning permits, as Supporting Document E to the Application Form.

Below please provide details on the sustainability of your proposal giving details on the duration and the possibility of expansion and adaptability of the project

Kindly provide information in relation to the NGOs/ Local Council's readiness for implementation of the measure/s being proposed (describe the work plan including details such as roles, outputs, milestones, timeline, and the like). Include also information on risks to the timely delivery of the project and how these can be mitigated.

Please explain how your measure/s will be promoted/publicised. A detailed overview is required.

Please give information on how the measure will be monitored. An Implementation Programme with time-lines indicating which milestones shall be reached at different stages of implementation is to be annexed to this Application. Kindly note that a status update report indicating progress and evidencing adherence to the Implementation Plan will need to be submitted to the Authority on a quarterly basis. This will be accompanied by an online meeting.

SECTION 4: Funding

Please state the total cost of the measure/s being proposed:

	€
How will costs including a	□Revenue generation
How will costs including a	
operational costs be supporte	ed 🛛 🗠 🗠 🗠 🗠 🗠 🗠 No plan
	□No costs required

Has additional funding for your project proposal been secured from any other source(s)?

□ Yes

If yes, please give further details of this additional finding in the box below.

🗆 No

Will additional funding for your project proposal be sought from any other source(s)?

□ Yes

If yes, please give further details of this additional finding in the box below.

🗆 No

Please give a breakdown of all projected expenditure relating to the measure/s being proposed.

Please attach copies of all quotations obtained for all expenditure identified for your proposal, as Supporting Document D to the Application Form.

Expenditure Details:	Cost:
Projected Total:	€

SECTION 5: Supporting Documents

1. Please indicate which of the following supporting documentation is attached to the Application Form:

a.	Partnership Agreement (applicable for all partnership applications)
b.	Proof of ownership (applicable as relevant, if not relevant Supporting Document D applies)
b.	Third party consent (applicable as relevant, if not relevant Supporting Document D applies)
с.	Planning permits/other consents (applicable as relevant)
d.	Quotations (applicable for all applicants)

SECTION 6: Declaration

Declaration:

I have read and understood the Guidelines to Applicants document for this Grant Scheme for the Implementation of Active Mobility or Citizen Engagement Measures by Local Councils and Non-Government Organisations.

I understand and agree to adhere to the criteria, terms, and conditions as outlined in the Guidelines to Applicants document.

I attach the required supporting documents.

I certify that all the information provided for the purpose of this application, and all information given in any documentation submitted in support of the application is truthful and accurate.

Signed: _____

Name in Block Capitals: ______

Date: _____

SECTION 7: Submitting your Application

Applications will be accepted by post or email. When submitting an application via email, please ensure that you have read the technical requirements as outlined in the GUIDELINES TO APPLICANTS document, and include the following reference in the subject line: APPLICATION FOR THE GRANT SCHEME FOR THE IMPLEMENTATION OF ACTIVE MOBILITY OR CITIZEN ENGAGEMENT MEASURES and your name.

Return Completed Application Forms and supporting documentation to:

•By Post: Ms. Cynthia Fiteni - Risk Management, Policy and EU Affairs Department, Authority for Transport in Malta, Pantar Road, Lija LJA 2021

•By email: sustainablemobility.tm@transport.gov.mt

Closing Date for receipt of completed application forms:

Applications will be accepted by no later than: 20th November 2022

Please note that the processing of any personal data by the Ministry for Transport, Infrastructure and Capital Projects is governed by the General Data Protection Regulation (GDPR) (EU) 2016/679.

Annex 1:

Please give the name and details of your local council/s/NGO/s. In the case of a partnership application, give the details of the lead local council/NGO and provide the details of all other local councils/NGO in the partnership in Annex 1 to the Application Form:

1.Name of Local Council/NGO:	
Address of Local Council/NGO:	
Name of Contact Person:	
Position of Contact Person:	
ID Card No:	
E-mail:	
Work Contact Number:	
Mobile Number:	
2.Name of Local Council/NGO:	
Address of Local Council/NGO:	
Name of Contact Person:	

Position of Contact	
Person:	
ID Card No:	
E-mail:	
Work Contact Number:	
Mobile Number:	