

# Application Form

Grant for  
Permanent Sustainable Mobility  
Measures Competition  
as part of the

# EUROPEAN MOBILITY WEEK

16-22 September

## Malta 2020



## 1. The Applicant

### Applicant Local Council

Address of the Local Council's main office

Name of Mayor

Mayor's Email address

### Contact Person

Name and Surname

Telephone and Mobile

Email

### Partner Local Council (if applicable)

Local Council

Name of Mayor

Contact Person

Telephone/Mobile

Email

## 2. Detailed Description of the Permanent Measure

Title of the Measure	
Aims and Objectives	
Identification of the problem which the measure will target	
Description of the measure	
<b>Theme under which the measure is being submitted:</b>	<i>Tick where applicable.</i>
Environmental and Energy	
Planning	
Transport	
2020 Theme: <i>Zero emission mobility for all</i>	
<b>Explain how your measure addresses the theme/s indicated above</b>	<u>Environmental and Energy:</u>
	<u>Planning:</u>
	<u>Transport:</u>
	<u>2020 Theme: <i>Zero emission mobility for all</i></u>

<b>Target Group(s)</b>	<i>Tick where applicable.</i>
Children	
Parents	
Tourists	
Workers	
Employers	
Mobility impaired citizens	
Elderly	
Other (please specify)	
<b>Location where the measure will be implemented (if applicable)</b>	<i>Attach site plan as an Annex.</i>
<b>Permits required to implement the measure (if any)</b>	<i>Tick where applicable.</i>
PA Full Permit	
PA DNO	
TM Permit	
Other	
<b>Please indicate the current stage of the permit application process (if applicable)</b>	

### 3. Data Collection

<b>Expected Results</b>	
<b>Success Indicators</b>	<i>Explanation of the chosen Indicator.</i>
Indicator 1:	
Indicator 2:	
Indicator 3:	
Indicator 4:	
Indicator 5:	
<b>Frequency of data collection</b>	
<b>Is Baseline Data going to be collected?</b>	<i>Yes/No</i>
<b>If 'No' please justify your answer.</b>	

### 4. Measure Implementation

<b>Implementation Plan</b>	<i>Add a Gantt Chart as guided in the Competition Manual as an Annex.</i>
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## 5. Measure Budget

<b>Line Item</b>	<b>Description (Type/ Quantity of Units to be purchased)</b>	<b>Cost</b>
Equipment (if applicable)		
Infrastructure (including works/ trenching etc. as applicable)		
Fees required for external experts (if applicable)		
Software (if applicable)		
Other		
<b>Marketing and Promotion</b>		
<b>Total Capital Costs</b>		

<b>Operational Costs</b>	
Please confirm that the Local Council will be able to support the operational costs required to maintain the proposed measure.	<i>Yes/No</i>
If no, please indicate how the operational costs will be funded.	
Is this measure expected to generate revenue?	<i>Yes/No</i>
Indicate the revenue expected to be generated per annum (if any)	
Are other sources of funding being considered?	<i>Yes/No</i>
If yes, please give details:	
De minimis Form	<i>Please attach as an Annex to this Application Form.</i>

<b>Contributions from Partners (To be filled in by Consortia only)</b>		
<b>Partner</b>	<b>Contribution</b>	<b>Allocated Budget</b>

## 6. Communication Strategy

	Communication Tool
1	
2	
3	
4	
...	

## 7. Additional Comments

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***Thank you for participating in the Competition for Permanent Sustainable Mobility Measures 2020.***

*In case your proposal is selected as a winner and/or finalist by the EUROPEANMOBILITYWEEK Adjudication Committee, your Local Council or Consortium will be notified and invited for a one-to-one meeting with Transport Malta.*



**\*\*TO BE PRINTED ON LOCAL COUNCIL LETTERHEAD\*\***

**COMMITMENT FORM**

Name of Local Council	
Locality	
Mayor	
Telephone No	
Email Address	

Dear Sir/Madam,

On behalf of Name of Local Council, I hereby verify that the information contained within our application for the Competition for Permanent Sustainable Mobility Measures 2020, is an accurate reflection of the work that is being undertaken by Name of Local Council and have read and accepted the regulations of the competition.

Yours sincerely,

Name of signatory:

Mayor / Executive Secretary