

Natural Hazards Detection System Grant - Phase 1

Form Preview

About you

* indicates a required field

Lead Organisation Details

Organisations can apply on their own or in a consortium of partners. The application must be submitted by a single 'lead organisation' who will have an Australian Business Number (ABN).

Organisation name *

Organisation Name

Organisation trading name

Organisation primary address in Australia *

Address

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

Organisation postal address

Address

If different from the above primary address

Organisation website URL *

If no URL indicate NA

Organisation 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 |

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Goods & Services Tax (GST)

DGR Endorsed

ATO Charity Type [More information](#)

ACNC Registration

Tax Concessions

Main business location

Must be an ABN.

Primary Contact

A primary contact from the lead organisation is needed to be the initial point of contact throughout the NHDS grant program. It is important that this person is identified should there be any questions regarding your application.

Primary Contact *

Title First Name Last Name

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Job Title *

Primary Phone Number *

Must be an Australian phone number.

Primary Email *

Must be an email address.

Are there a secondary contact you would like to nominate? *

- Yes
 No

Secondary Contact Person

Title First Name Last Name

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Position and organisation

Primary Phone Number

Must be an Australian phone number.

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Primary Email

Must be an email address.

Adverse Findings and Legal Proceedings

Is the organisation and/or any of the director(s) subject to adverse legal or regulatory findings? *

- Yes
 No

Is the organisation and/or any of the director(s) subject to outstanding legal proceedings? *

- Yes
 No

Please provide details of the adverse legal or regulatory findings

Please provide details of the outstanding legal proceedings

Eligibility Questions

* indicates a required field

Eligible Organisation Type

Are you one of the following: *

- A company incorporated under the Corporations Act (including a company limited by guarantee)
 An Aboriginal and Torres Strait Islander Corporation registered under the Corporations (Aboriginal and Torres Strait Islander) Act 2006
 Neither

Please review the Program Guidelines to ensure your organisation is eligible for this program.

It appears that your application is ineligible for the NHDS

By selecting Neither, this application is automatically ineligible.

Please consult the [Program Guidelines](#) or contact grants@chiefscientist.nsw.gov.au to confirm your eligibility.

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Eligibility Organisation Requirements

You must meet all of the below requirements, confirm your eligibility by confirming that you as the lead organisation meets the below requirements.

Be non-tax exempt *

- Yes
- No

Have an account with an Australian financial institution *

- Yes
- No

Hold the intellectual property (IP) rights or possess the rights to commercialise the technology. *

- Yes
- No

Demonstrate that the technology can be trialed in NSW during the testing periods *

- Yes
- No

Will be demonstrated in the application's project plan and other relevant assessment criteria questions

Demonstrate that any funding received from the NSW Physical Sciences Fund (PSF), Small Business Innovation and Research (SBIR) Program, or other NSW, state, or federal government grant programs does not duplicate activities proposed under this Program *

- Yes
- No

Will be demonstrated in the application's budget section

It appears that your application is ineligible for the NHDS

By selecting No to any of the questions above, this application is automatically ineligible.

Please consult the [Program Guidelines](#) or contact grants@chiefscientist.nsw.gov.au to confirm your eligibility.

Data requirements

In order to be eligible for this program you agree that:

All data generated throughout the Program will be owned by the NSW Government and may be used for future projects or data analysis *

- Yes
- No

Data must be provided in the format specified in the Challenge Statement document *

- Yes

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No

It appears that your application is ineligible for the NHDS

By selecting No, this application is automatically ineligible. Please consult the [Program Guidelines](#) or contact grants@chiefscientist.nsw.gov.au to confirm your eligibility.

Challenge Selection

* indicates a required field

Primary Challenge Selection

Applicants must select a single 'primary' challenge for which their solution will be assessed. If a solution is applicable to multiple challenges, applicants will be able to select the requirements of other challenges that their solution could address.

Applicants may submit applications for multiple challenges.

The Assessment Panel may consider an applicant's ability to meet multiple challenges with a single solution against value for money and operational requirement considerations.

Select one primary challenge that your application will be considered for? *

- | | |
|---|---|
| <input type="radio"/> Challenge 1 - Water over Roads and Assets (Flood) | <input type="radio"/> Challenge 6 - Fire Assessment and Monitoring (Fire) |
| <input type="radio"/> Challenge 2 - Flash Flooding Water Levels (Flood) | <input type="radio"/> Challenge 7 - Local Fire Weather Monitoring (Fire) |
| <input type="radio"/> Challenge 3 - Water Level from Imagery (Flood) | <input type="radio"/> Challenge 8 - Bushfire Fuel and Soil Moisture Monitoring (Fire) |
| <input type="radio"/> Challenge 4 - Rainfall/Soil Moisture Data (Flood) | <input type="radio"/> Challenge 9 - Existing Data (Flood & Fire) |
| <input type="radio"/> Challenge 5 - Ignition Detection (Fire) | |

Primary - Challenge 1 Attributes

Select all of the attributes of Challenge 1 that your solution can address. Please review the [Challenge Statements](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 1 select all the attributes that your solution can address *

- Water Over (Mandatory)
- Water Over Height
- Water Over Velocity
- Crossing Image

At least 1 choice must be selected.

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The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 1 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|--|--|--|
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire location | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Flood Rainfall Total | <input type="checkbox"/> Fire Image | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Temp | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Humidity | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Flood Soil Moisture Zones | <input type="checkbox"/> Fire Wind Speed | <input type="checkbox"/> Fire Soil Moisture |
- (Upper, Lower Deep)
- Fire Detection

At least 1 choice must be selected.

Primary - Challenge 2 Attributes

Select all of the attributes of Challenge 2 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 2 select all the attributes that your solution can address *

- Water Level (Mandatory)
- Water Velocity
- Water Image

At least 1 choice must be selected.

The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 2 - Secondary Attributes

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Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|--|--|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire Wind Speed |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire Direction | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire location | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Flood Rainfall Total | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Image | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Temp | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Flood Soil Moisture Zones | <input type="checkbox"/> Fire Humidity | <input type="checkbox"/> Fire Soil Moisture |
- (Upper, Lower Deep)

At least 1 choice must be selected.

Primary - Challenge 3 - Attributes

Select all of the attributes of Challenge 3 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 3 select all the attributes that your solution can address *

- Water Level (Mandatory)
- Water Velocity
- Water Over
- Water Over Height
- Water Over Crossing
- Crossing/ Stream Image

At least 1 choice must be selected.

The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 3 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for

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detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|--|--|--|
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire Direction | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire location | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Flood Rainfall Total | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Image | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Flood Soil Moisture Zones (Upper, Lower Deep) | <input type="checkbox"/> Fire Temp | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire Humidity | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Wind Speed | <input type="checkbox"/> Fire Soil Moisture |

At least 1 choice must be selected.

Primary - Challenge 4 Attributes

Select all of the attributes of Challenge 4 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 4 select all the attributes that your solution can address *

- Flood Rainfall Total (Mandatory)
- Flood Soil Moisture (Mandatory)
- Flood Rainfall Intensity
- Flood Soil Moisture Zones (Upper, Lower Deep)

At least 1 choice must be selected.

The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 4 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|--|--|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Fire Direction | <input type="checkbox"/> Fire Rainfall Total |

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- | | | |
|---|--|--|
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire location | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire Image | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire Temp | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Humidity | <input type="checkbox"/> Fire Soil Moisture |
| <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire Wind Speed | |

At least 1 choice must be selected.

Primary - Challenge 5 Attributes

Select all of the attributes of Challenge 5 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 5 select all the attributes that your solution can address *

- Fire Detection (Mandatory)
- Fire Bearing/ Distance
- Fire detection context data

At least 1 choice must be selected.

The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 5 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|---|---|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Wind Speed |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Flood Soil Moisture Zones (Upper, Lower Deep) | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire Direction | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Fire location | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire Image | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Temp | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Flood Rainfall Total | <input type="checkbox"/> Fire Humidity | <input type="checkbox"/> Fire Soil Moisture |

At least 1 choice must be selected.

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Primary - Challenge 6 Attributes

Select all of the attributes of Challenge 6 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 6 select all the attributes that your solution can address *

- Fire Direction (Mandatory)
- Fire location (Mandatory)
- Fire Proximity (Mandatory)
- Fire Intensity
- Fire Image

At least 1 choice must be selected.

The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 6 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|---|--|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Flood Soil Moisture Zones (Upper, Lower Deep) | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire Temp | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire Humidity | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Wind Speed | <input type="checkbox"/> Fire Soil Moisture |
| <input type="checkbox"/> Flood Rainfall Total | | |

At least 1 choice must be selected.

Primary - Challenge 7 Attributes

Select all of the attributes of Challenge 7 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

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Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 7 select all the attributes that your solution can address *

- | | |
|--|--|
| <input type="checkbox"/> Fire Temp (Mandatory) | <input type="checkbox"/> Fire Rainfall Total (Mandatory) |
| <input type="checkbox"/> Fire Humidity (Mandatory) | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Fire Wind Speed (Mandatory) | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Fire Wind Gust (Mandatory) | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Fire Wind Direction (Mandatory) | |

At least 1 choice must be selected.

The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
 No

Challenge 7 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|--|---|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Direction |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Flood Rainfall Total | <input type="checkbox"/> Fire location |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Proximity |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Intensity |
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Flood Soil Moisture Zones (Upper, Lower Deep) | <input type="checkbox"/> Fire Image |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Fine Fuel Moisture |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Fire Soil Moisture |

At least 1 choice must be selected.

Primary - Challenge 8 Attributes

Select all of the attributes of Challenge 8 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 8 select all the attributes that your solution can address *

- Fire 10hr Fuel Moisture (Mandatory)
 Fire Fine Fuel Moisture
 Fire Soil Moisture

At least 1 choice must be selected.

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The Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. Does your solution address the attributes of other challenges? *

- Yes
- No

Challenge 8 - Secondary Attributes

Your application will be assessed on your selected primary challenge only. As outlined in the Program Guidelines, the Assessment Panel may choose to take into account where applicants are able to meet the attribute requirements across multiple challenges. For further information on the assessment process please review the [Program Guidelines](#), for detailed information of challenge requirements please review the [Challenge Statements](#) thoroughly.

Select all attributes your solution could address in addition to your primary challenge. *

- | | | |
|---|---|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Flood Soil Moisture | <input type="checkbox"/> Fire Image |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Temp |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Flood Soil Moisture Zones (Upper, Lower Deep) | <input type="checkbox"/> Fire Humidity |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire Wind Speed |
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire Direction | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire location | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Crossing/ Stream Image | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Flood Rainfall Total | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Vapour Pressure Deficit |

At least 1 choice must be selected.

Primary - Challenge 9 Attributes

Select all of the attributes of Challenge 9 that your solution can address. Please review the [Challenge Statement](#), for detailed information regarding the specific requirements per attribute.

Note that if your solution cannot meet the mandatory requirement, then it will be deemed ineligible and the application will not be considered.

For Challenge 9 there are no specific attributes outlined in the Challenge Statements. From the overall pool of identified attributes, across fire and flood, which could be assisted or addressed through your solution? Select all that apply.

*

- | | | |
|--|---|--|
| <input type="checkbox"/> Water Over | <input type="checkbox"/> Flood Rainfall Intensity | <input type="checkbox"/> Fire Wind Speed |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Flood Soil Moisture Zones (Upper, Lower Deep) | <input type="checkbox"/> Fire Wind Gust |
| <input type="checkbox"/> Water Over Velocity | <input type="checkbox"/> Fire Detection | <input type="checkbox"/> Fire Wind Direction |
| <input type="checkbox"/> Crossing Image | <input type="checkbox"/> Fire Bearing/ Distance | <input type="checkbox"/> Fire Rainfall Total |
| <input type="checkbox"/> Water Level | <input type="checkbox"/> Fire detection context data | <input type="checkbox"/> Solar Radiation |
| <input type="checkbox"/> Water Velocity | <input type="checkbox"/> Fire Direction | <input type="checkbox"/> Dew Point |
| <input type="checkbox"/> Water Image | <input type="checkbox"/> Fire location | <input type="checkbox"/> Vapour Pressure Deficit |
| <input type="checkbox"/> Water Over Height | <input type="checkbox"/> Fire Proximity | <input type="checkbox"/> Fire 10hr Fuel Moisture |
| <input type="checkbox"/> Water Over Crossing | <input type="checkbox"/> Fire Intensity | <input type="checkbox"/> Fire Fine Fuel Moisture |

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- Crossing/ Stream Image
- Flood Rainfall Total
- Flood Soil Moisture
- Fire Image
- Fire Temp
- Fire Humidity
- Fire Soil Moisture
- Other

At least 1 choice must be selected.

Application Overview

* indicates a required field

About your application

Application Title *

Name of the proposed solution

Brief description of the proposed technology solution and its application to the challenge statement *

Word count:

Must be no more than 300 words.

Provide a short description (300 words max) - what are you out to do?

Grant amount requested (up to \$50,000 per application) *

Must be a dollar amount.

What is the total financial support you are requesting in this application?

Are you applying in partnership with other organisations? *

- Yes
- No

Partnerships

If you are applying as a partnership with other organisations please provide the details of your partners below. Add as many lines as partners.

| Name of Organisation | Where are they located? Headquarters? | Role in the partnership, what they will contribute |
|----------------------|--|---|
| | | |
| | | |
| | | |
| | | This should be brief, further detail can be shared later in the application |

Assessment Criteria

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* indicates a required field

Solution Criteria

1. Describe your proposed solution and how it addresses the challenge. Ensure you describe the main technical deliverables of the solution, and what might be achieved by deploying the solution to address the challenge. Ensure you address how your solution meets the requirements. *

Word count:

Must be no more than 800 words.

2. Articulate the readiness of your solution to meet the below milestones within the allotted timeframes: Phase 1 (0-6 months): Taking a proposal to proof-of-concept, prototyped and tested on a small scale with collaboration and engagement of key stakeholders and potential end-users, and Phase 2 (9 - 20 months): Taking a proof-of-concept to a 12-month pilot in the field (sites to be chosen by the participating agencies). Working with stakeholders to deploy the technology, manage its maintenance and monitor its performance. *

Word count:

Must be no more than 800 words.

You may consider the maturity of your proposed technology/s, precedent in other markets, pre-existing trials of solution components in Australian conditions or other factors that demonstrate your confidence in meeting the technical and trial readiness criteria.

3. Describe how your proposed solution is innovative and/or superior to solutions that are currently in use in NSW. What elements of your solution do you expect to be new to your challenge areas, how does your solution bring innovation to natural hazard detection, does it exist in other industries? *

Word count:

Must be no more than 800 words.

Note if there are any relevant intellectual property rights, consider if any pictures or diagrams can be included in the video if deemed necessary

4. Considering your solution post the NHDS program what is the anticipated unit cost of the technology? What would be the anticipated ongoing maintenance costs?

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Delivery Criteria

5. Describe your organisation's capability and capacity to deliver the solution. Ensure you describe your organisation and project team members' relevant skills and experience as well as the organisation capacity to deliver both Phase 1 and Phase 2 of this program. *

Word count:

Must be no more than 800 words.

Please note we will not accept any LinkedIn links. Also note that Phase 2 will require on-going maintenance and management of the deployed technology in regional NSW over the 12-month period, how will you meet these needs.

6a. How does your solution comply with the data collection requirements listed in the challenge statement? Specifically, what is the minimum connectivity group required for your solution and the types of connections it supports? *

Word count:

Must be no more than 400 words.

6b. What other connectivity groups and methods could your solution use as alternatives, what would be the impacts on data availability and frequency, if any? *

Word count:

Must be no more than 400 words.

Access to Agency data may require additional negotiation and agreements including licensing costs to the applicant, that may exceed the time and budget for the POC stage. If access to this data is an integral part of the Application this needs to be highlighted in this section.

6c. Describe any other resources needed for your solution to successfully complete proof-of-concept and trial phases of this grant. This might include other equipment, Agency data, personnel, infrastructure, imported components or specific external experts or end-users. Are there any potential risks in obtaining these resources that could compromise the success of your solution within the allotted timeframes? *

Word count:

Must be no more than 800 words.

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Access to Agency data may require additional negotiation and agreements including licensing costs to the applicant, that may exceed the time and budget for the POC stage. If access to this data is an integral part of the Application this needs to be highlighted in this section.

Project plan and budget

Demonstrate the plan to achieve the Phase 1, proof-of-concept, outcomes required of the NHDS program. Answer the below questions regarding your project plan, budget and management, please note that this is ONLY for Phase 1 proof-of-concept.

7a. What are the milestones and deliverables for the six-month period to develop a proof-of-concept. Identify when and how key stakeholders, agencies and resources would be engaged. *

Word count:
Must be no more than 400 words.

7b. What is the project management processes that will ensure you achieve the milestones, including how you will work with partners if you are submitting with multiple partners *

Word count:
Must be no more than 400 words.

7c. The main technical, commercial and environmental risks and what you will do to mitigate them. *

Word count:
Must be no more than 400 words.

7d. How will you handle any IP issues which might arise during the project? *

Word count:
Must be no more than 400 words.

Budget Income

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7e. Complete the below income budget for the proof-of-concept six-month period, not including the NHDS grant amount. Income refers to any cash and/or in-kind contributions provided by applicants such as personnel or leadership time, access to work spaces, fees, testing etc which will not be covered by the NHDS grant money.

If you are applying in a partnership or consortium please identify the partner providing the cash and/or in-kind contributions.

| Income Description | \$ Amount (GST excl) |
|---|----------------------|
| Click 'maximise' to see the table enlarged. | |
| | |
| | |
| | |
| | |

7f. Has your organisation received funding from the NSW Government or a grant from any other organisation for the same purpose as this Program? *

Yes No

If yes, provide details on what you received, for what project and when you received it: *

Word count:
Must be no more than 300 words.

Budget - Expenditure

7g. Complete the below project budget for the proof-of-concept six-month period. When considering your budget please review the eligible and ineligible costs as outlined by the Program Guidelines.

For expenditure include the following details in the budget table:

- **Category** - Identify the category of expenditure e.g. company personnel, expert technical services, equipment, travel etc. Include as many as required to show the breakdown of costs and value for money relating to project activities.
- **Description** - Provide detail to justify the estimated cost i.e. hourly rate of personnel or experts, unit cost of equipment, travel rates for etc.
- **Capital Asset** - Indicate expenses that are capital assets (physical or virtual) that are purchased and supplied as part of the grant.
- **Estimated budget** - Total cost for the category to complete the pilot. Include grant funding and costs contributed by the company and other sources

| Category | Description | Capital Asset: Yes or No | \$ Estimated budget GST exclusive |
|---|-------------|--------------------------|-----------------------------------|
| Click 'maximise' to see the table enlarged. | | | Must be a dollar amount. |
| | | | |
| | | | |
| | | | |

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| | | | |
|--|--|--|--|
| | | | |
|--|--|--|--|

Budget Total

Total Income Amount - Cash & In-kind

This number/amount is calculated.
(Not including the NHDS grant amount requested)

Total Expenditure Amount

This number/amount is calculated.

If you have any comments or context regarding your budget, income or expenditure, please provide that detail here.

Video presentation

* indicates a required field

Your application should include a video presentation no longer than five minutes. Your video must:

1. Describe the solution, what it does and how it works
2. Describe how your technology will help to solve the primary challenge one or more of the challenges consider any critical requirements
3. Describe what elements of your solution will be innovative in addressing natural hazards detection
4. Describe how it could be deployed in a Phase 2 pilot and your organisation's expertise and capacity to delivery this project.

You may attach the video file to your submission or include a link in the body of the submission - select your preference. *

- Upload video
- Supply link

Provide link to your video

Must be a URL.

Upload your video

Attach a file:

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Declaration and submission

* indicates a required field

Declaration

I declare that:

- I have read and understood the Terms.
- I have read and understood the [Program Guidelines](#) with respect to assistance under this Program.
- I am authorised to make this application on behalf of the applicant.
- The applicant agrees to the Terms and the Program Guidelines.
- The information provided in this application is true, correct and valid as at the date of submitting this application.

By ticking this box I confirm the above to be true on behalf of this application. *

I confirm

I agree to the Application Terms *

- Yes
 No

I consent to my application being shared with NSW Agencies who may be interested in my solution independent of this grant process. *

- Yes
 No

This declaration is made on behalf of the Lead Organisation and completed by: *

Title First Name Last Name

| | | |
|----------------------|----------------------|----------------------|
| <input type="text"/> | <input type="text"/> | <input type="text"/> |
|----------------------|----------------------|----------------------|

Position *

Organisation *

Organisation Name

Date of declaration *

Must be a date.

Ineligible response

By selecting No, this application is automatically ineligible. Please consult the [Program Guidelines](#) or contact grants@chiefscientist.nsw.gov.au to confirm your eligibility.

