Wildlife Rehab Sector Emergency and Operational Support
Form Preview

About the rebate

The NSW Government is providing a $1.44 million operational expenses rebate to help eligible individual wildlife rehabilitators and volunteers meet everyday costs associated with wildlife rescue, rehabilitation and care and provide targeted support for wildlife emergency response. This is the first funding program under the NSW Government's $9 million, four-year package to implement the Wildlife Rehabilitation Sector Review.

This program provides $1.44 million through three streams:

- Stream A: $1.09 million for statewide operational expenses
- Stream B: $250,000 for H5 bird flu PPE
- Stream C: $100,000 for flying-fox emergency relief.

Streams B and C target specified local government areas with identified events.

This application is for individual wildlife rehabilitators and volunteers authorised under a current biodiversity conservation licence. Each applicant may receive one rebate per stream in this round.

Before you begin

- As the applicant, you are the person who incurred and paid the expense, and you are seeking reimbursement directly.
- **You may apply for one or more streams but must submit no more than one application per stream.**
- If multiple applications for any one stream are received, only one application will be assessed.
- The same expense cannot be claimed under more than one stream.
- Incomplete applications and/or applications received after the closing date will not be considered.

Before you apply:

- Check the program guidelines to understand the eligibility criteria for the three funding streams
- Check that your expense is eligible
- Ensure your expense was incurred on or after the date specified for the stream and is supported by a receipt.

If you have questions about your eligibility for the rebate, please email wildlife.rehabgrants@dcceew.nsw.gov.au before you start your application.

Application Number

This field is read only.
The identification number or code for this submission.

Grant Program Name

This field is read only.
The program this submission is in.

Disclaimer

The Applicant acknowledges and agrees that:

- submission of this application does not guarantee funding will be granted for any rebate, and the Department expressly reserves its right to accept or reject this application at its discretion;
- they 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
- they have read the Program Guidelines for the rebate and have fully informed themselves of the relevant requirements.

Use of Information

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

- 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

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.

Applicant Details

* indicates a required field

Applicant Details

Applicant *

Title | First Name | Last Name

Address *

Address

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

Postal Address *

Address

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

Primary Phone Number *

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

Other Phone Number

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

Email Adress *

Must be an email address.

Eligibility

* indicates a required field

Have you (or anyone else on your behalf) previously been approved for a rebate under this program? *

☐ Stream A (Operational Expenses Rebate) - I have received a rebate under stream A
☐ Stream B (H5 Bird Flu Support) - I have received a rebate under stream B
☐ Stream C (Flying-fox Emergency Relief) - I have received a rebate under stream C
☐ No – Neither I nor anyone acting on my behalf has previously received a rebate through this program

Please select all streams under which a rebate has previously been approved.

Applicants can only receive one rebate per stream. Unfortunately based on your answer, you are unable to proceed.

Are you an independently licensed wildlife rehabilitator or a member of a licensed wildlife rehabilitation provider(s) in NSW? *

○ Yes
○ No

You have chosen a response which means you are ineligible to apply for this payment.

Please provide the name of your wildlife rehabilitation provider(s), the relevant licence number(s), and your membership number(s) (if applicable).

If you are a member of more than one organisation, add additional row/s to the table below by clicking the 'Add More' button and include the name and membership number for each organisation.

You must also upload evidence of your current membership, such as a photograph of your membership card showing your name and membership number, or an email confirming your membership.

Wildlife rehabilitation provider name:	Licence number:	Membership number:	Upload evidence:

Are you currently authorised under a licence to participate in wildlife rehabilitation in NSW? *

○ Yes
○ No

This includes people who directly undertake wildlife rehabilitation activities (active rehabilitators). It does not include individuals whose involvement is limited to administrative or office-based roles.

You have chosen a response which means you are ineligible to apply for this payment.

If you are a member a more than one wildlife rehabilitation provider, which one are you supporting with this rebate?

Were the expenses claimed in this rebate used for home based care or used at a wildlife rehabilitation facility? *
- ○ Home based care
- ○ Wildlife rehabilitation facility
- ○ Both

Which species group(s) are you authorised to rehabilitate? *
- ☐ Flying foxes and microbats
- ☐ Koalas
- ☐ Possums and Gliders
- ☐ Macropods
- ☐ Wombats
- ☐ Monotremes
- ☐ Marine mammals
- ☐ Other mammals
- ☐ Birds of prey
- ☐ Seabirds and waterbirds
- ☐ Birds (general)
- ☐ Snakes, lizards and monitors
- ☐ Freshwater turtles
- ☐ Marine turtles
- ☐ Sea snakes

More than one can be selected

Stream Selection

Which funding stream(s) are you applying for? *
- ☐ Stream A- Operational Expenses Rebate
- ☐ Stream B- H5 Bird Flu Support
- ☐ Stream C- Flying-fox Emergency Relief

Select all that apply. If you have previously received funding under one of these streams, you are not eligible for additional claims in that stream.

Stream A- Operational Expenses Rebate

* indicates a required field

How many expenses are included in this claim? *

Must be a number.

Are the expenses directly related to wildlife rehabilitation activities that you are authorised to undertake under your wildlife rehabilitation licence? *
- ○ Yes
- ○ No

You have chosen a response which means you are ineligible to apply for this payment.

Funding must not be used for costs that:

- Are ineligible (note: shipping and delivery fees are **not** eligible expenses)
- Do not have a receipt
- Breach licence conditions
- Have already been funded or reimbursed by a wildlife rehabilitation provider or another government program.

The rebate cannot be used for durable assets, strategic regional assets, veterinary hospitals, research, capital works, fines or penalties, general donations, or unlicensed activities.

Eligible costs incurred between 16 October 2026 and 31 March 2027 may be claimed.

Complete the following table for each expense:

Note: Click 'Maximise' to expand the table to show all columns. Click 'Add More' to add additional rows.

Date of purchase	**Category**	**Briefly explain how this expense supports wildlife rescue and/or rehabilitation**	**Amount paid**	**Amount claimed**	**Receipt number**	**Proof of payment**	**Has this expense been reimbursed/funded/subsidised from another source?**
							❍ Yes ❍ No
Must be a date.	For more information on what each category includes, please refer to the Guidelines.		Must be a dollar amount.	Must be a dollar amount.		Receipts and proof of payment must be provided for each expense and must clearly show the item purchased, purchase date, and amount paid. Invoices, quotes, order confirmations, and similar	For example, through a grant program, wildlife rehabilitation organisation, or other funding arrangement. Please remove any duplicated amount within the Amount Claimed box.

						documents will not be accepted as proof of purchase	

Please provide more information about the expenses already claimed and why you are seeking to claim them again. If you no longer wish to submit the claim, please remove it from the table above by selecting the '-' option on the line. *

Stream A- Total amount paid

This number/amount is calculated.

Stream A- Total amount claimed

This number/amount is calculated.
$200 maximum eligible to be claimed.

Stream B- H5 Bird Flu Support

* indicates a required field

Stream B provides for H5 bird flu preparedness and response. It is not available state wide. Applicants must be located in a specified local government area (LGA) with an identified event and meet the stream-specific criteria. Applicants outside these LGAs will be assessed on a case-by-case basis.

In which local government area do you undertake wildlife rescue and/or rehabilitation activities? *

- ☐ Bayside
- ☐ Bega Valley
- ☐ Canterbury-Bankstown
- ☐ Central Coast
- ☐ Coffs Harbour
- ☐ Eurobodalla
- ☐ Goulburn-Mulwaree
- ☐ Kiama
- ☐ Ku-ring-gai
- ☐ Lake Macquarie
- ☐ Mid-Coast
- ☐ Nambucca Valley
- ☐ Newcastle
- ☐ Northern Beaches
- ☐ Parramatta
- ☐ Penrith
- ☐ Port Macquarie-Hastings
- ☐ Port Stephens
- ☐ Randwick
- ☐ Shellharbour
- ☐ Shoalhaven
- ☐ Sutherland Shire
- ☐ Wentworth
- ☐ Wollongong
- ☐ Other:

If you are a home-based rehabilitator, please provide the LGA in which you reside. If you volunteer at a wildlife rehabilitation facility, provide the LGA where the facility is located. If you undertake activities across multiple LGAs, please list up to three LGAs.

You have identified that you undertake wildlife rescue and/or rehabilitation activities outside the eligible LGAs. What is your reason for claiming the rebate?

How many expenses are you claiming? *

Must be a number.

Are the expenses directly related to H5 bird flu preparedness activities that you are authorised to undertake under your wildlife rehabilitation licence? *

○ Yes
○ No

You have chosen a response which means you are ineligible to continue your application under this stream.

PPE only: fit-for-purpose P2 or N95 respirators, disposable coveralls or body suits, disposable gloves, eye protection such as safety glasses or face shields, and disposable boot or shoe covers. Note: shipping and delivery fees are **not** eligible expenses.

Refer to the guidelines for more information on eligible expenditure.

Eligible costs incurred between 1 July 2026 and 31 March 2027 may be claimed.

Complete the following table for each expense:

Note: Click 'Maximise' to expand the table to show all columns. Click 'Add More' to add additional rows.

Date of purchase	Category	Briefly explain how this expense supports H5 Bird Flu preparedness	Amount paid	Amount claimed	Receipt number	Proof of payment	Has this expense been reimbursed/funded/subsidised from another source?
							❍ Yes ❍ No
Must be a date.	For more information on what each category includes, please refer to the Guidelines.		Must be a dollar amount.	Must be a dollar amount.		Receipts and proof of payment must be provided for each expense and must clearly show the item purchased, purchase date, and amount paid.	For example, through a grant program, wildlife rehabilitation organisation, or other funding arrangement), please remove any duplicated amount within the

						Invoices, quotes, order confirmations, and similar documents will not be accepted as proof of purchase	Amount Claimed box.

Please provide more information about the expenses already claimed and why you are seeking to claim them again. If you no longer wish to submit the claim, please remove it from the table above by selecting the '-' option on the line(s) above. *

Stream B- Total amount paid

This number/amount is calculated.

Stream B- Total amount claimed

This number/amount is calculated.
$150 maximum eligible to be claimed.

Stream C- Flying-fox Emergency Relief

* indicates a required field

Stream C provides funding of up to $500 per applicant for eligible flying-fox emergency relief.

Applicants may be statewide and must be an active licensed flying-fox rehabilitator supporting rescue and rehabilitation in specified local government areas with identified events.

Are you authorised to rescue, rehabilitate and release flying-foxes? *

- ○ No
- ○ Yes

You must be authorised to specifically rescue, rehabilitate and release flying-foxes to be eligible for this rebate.

You have chosen a response which means you are ineligible to continue your application under this stream.

Which local government area (LGA) do you undertake wildlife rescue and/or rehabilitation activities? *

- ☐ Ballina
- ☐ Bayside
- ☐ Bega Valley
- ☐ Bellingen
- ☐ Blacktown
- ☐ Blue Mountains
- ☐ Byron
- ☐ Camden
- ☐ Campbelltown
- ☐ Canterbury-Bankstown
- ☐ Central Coast
- ☐ Cessnock
- ☐ Clarence Valley
- ☐ Coffs Harbour
- ☐ Cumberland
- ☐ Dungog
- ☐ Eurobodalla
- ☐ Fairfield
- ☐ Georges River
- ☐ Hawkesbury
- ☐ Hornsby
- ☐ Hunters Hill
- ☐ Inner West
- ☐ Kempsey
- ☐ Kiama
- ☐ Ku-ring-gai
- ☐ Kyogle
- ☐ Lake Macquarie
- ☐ Lismore
- ☐ Liverpool
- ☐ Maitland
- ☐ Mid-Coast
- ☐ Muswellbrook
- ☐ Nambucca Valley
- ☐ Newcastle
- ☐ Northern Beaches
- ☐ Parramatta
- ☐ Penrith
- ☐ Port Macquarie-Hastings
- ☐ Port Stephens
- ☐ Randwick
- ☐ Richmond Valley
- ☐ Ryde
- ☐ Shellharbour
- ☐ Shoalhaven
- ☐ Singleton
- ☐ Sutherland Shire
- ☐ The Hills
- ☐ Tweed
- ☐ Upper Hunter
- ☐ Wingecarribee
- ☐ Wollondilly
- ☐ Wollongong

If you are a home-based rehabilitator, please provide the LGA in which you reside. If you volunteer at a wildlife rehabilitation facility, provide the LGA where the facility is located. If you undertake activities across multiple LGAs, please list up to three LGAs. Select at least one LGA area and no more than three

Please provide a brief explanation of how the claimed funds have been used to support the current flying-fox incident. *

Include details of the number of flying-fox rescues undertaken, the location(s) where rescues occurred, and how the expenses directly supported flying-fox rescue and/or rehabilitation activities.

How many expenses are included in this claim? *

Must be a number.

Eligible costs incurred between 16 September 2026 and 31 March 2027 may be claimed.

Note: shipping and delivery fees are not eligible expenses.

Complete the following table for each expense:

Note: Click 'Maximise' to expand the table to show all columns. Click 'Add More' to add additional rows.

Date of purchase	Category	Description of items	Amount paid	Amount claimed	Receipt number	Proof of payment.	Has this expense been reimbursed/funded/subsidised from another source?
							❍ Yes

							❍ No
Must be a date.	For more information on what each category includes, please refer to the Guidelines.		Must be a dollar amount.	Must be a dollar amount.		Receipts and proof of payment must be provided for each expense and must clearly show the item purchased, purchase date, and amount paid. Invoices, quotes, order confirmations, and similar documents will not be accepted as proof of purchase	For example, through a grant program, wildlife rehabilitation organisation, or other funding arrangement), please remove any duplicated amount within the Amount Claimed box.

Please provide more information about the expenses already claimed and why you are seeking to claim them again. If you no longer wish to submit the claim, please remove it from the table above by selecting the '-' option on the line(s) above. *

Stream C- Total amount paid

This number/amount is calculated.

Stream C- Total amount claimed

This number/amount is calculated.
$500 maximum eligible to be claimed.

Claim Overview

Total amount being claimed for Stream A

This amount is automatically calculated based on the information provided in your application. If you are claiming more than the maximum for this

Total amount being claimed for Stream B

This amount is automatically calculated based on the information provided in your application. If you are claiming more than the maximum for this

Total amount being claimed for Stream C

This amount is automatically calculated based on the information provided in your application. If you are claiming more than the maximum for this

stream, you will only be paid up to the maximum.

stream, you will only be paid up to the maximum.

stream, you will only be paid up to the maximum.

Total being claimed

Total Amount Requested

This number/amount is calculated.
This is the total being claimed over all 3 streams based on the information you have provided in your application.

Payment and Supporting Documents

* indicates a required field

Payment privacy

The Department will pay the rebate into the nominated bank account. Please check the details you have provided are correct to ensure successful payment.

Applicant Primary Bank Account *
Account Name

BSB Number Account Number

Must be a valid Australian bank account format.

Financial Institution *

Confirmation of Bank Details.

Upload a document which clearly displays ALL of the following bank account details:

- Financial institution
- Account name (this must match the applicants name)
- BSB
- Account number

Documents that commonly contain all this information are:

- Bank statements
- Deposit slips
- Proof of account balance
- letterhead from banks

The account balance and financial or transactional information should be redacted.

Please do NOT provide any passwords or verification codes.

We require this information as part of our validation process and will not be able to progress your application if the required document if not provided.

Bank Details File Upload *
Attach a file:

Declaration and Authorisation

* indicates a required field

The Applicant represents and warrants that this application has been submitted by an eligible applicant based on the guidelines.

By submitting this application form I hereby declare that:

- 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 understand that any false declaration may render this application ineligible/invalid;
- I am 18 years of age or older;
- I incurred and paid the expenses included in this application;
- The expenses were incurred for wildlife rehabilitation activities;
- The expenses included in this application have not been reimbursed, and are not being claimed, through another local group, grant, insurer or funding source;
- I will retain relevant records and provide them if requested for verification or audit; and
- I agree that details of the rebate, including my name, the eligible items funded, and the amount of funding awarded, may be provided to my licensed wildlife rehabilitation organisation(s) for the purposes of grant assessment and administration, reporting, monitoring the distribution and use of grant funding, and verifying grant-funded purchases and activities.

I agree * ☐ Yes

Name: *

Date: *
Must be a date.