

2026-27 VESEP Application Form for Other Eligible Volunteer Organisations

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Useful VESEP Application Information

VESEP Program Details

The Volunteer Emergency Services Equipment Program (VESEP) is an annual program funded by the Victorian Government, which provides grants to local volunteer emergency services groups for operational equipment, vehicles and appliances, and minor facility improvements.

- The 2026-27 VESEP offers grants of up to \$250,000 (excluding GST).
- Funding is only available for the financial year in which it is awarded.
- VESEP will fund \$2 for every \$1 contributed by the group.
- A co-contribution by the group is a mandatory condition of the program, unless special access is granted.
- You must attach quotations, specifications, photographs and any other material in support of your application.

VESEP Application Close Date

The VESEP Applications close: **4pm Thursday, 11 June 2026.**

Late applications will not be accepted

How to Apply

VESEP applications will only be accepted by submitting this form.

All questions marked with an asterisk must be completed to enable this form to be submitted.

Once you have completed the form you must select the '**Review and Submit**' tab.

When you have finalised your application and all the required fields have been completed, select the '**Submit**' tab at the top of the form to submit your application.

Upon submission of your application, you will receive an email confirmation and a copy of your application for your records.

If you do not receive the confirmation email please contact us at

emvgrants@justice.vic.gov.au.

VESEP Eligibility and Funding Criteria

To be eligible to apply for a grant under the agency category of 'Other', your organisation must be an emergency services volunteer group and:

- be a volunteer organisation/agency identified with nominated roles and responsibilities within the State Emergency Management Plan; or
- have in the past two years (prior to the application being made) performed a role or discharged a responsibility of an emergency services agency (as defined in

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the *Emergency Management Act 1986*) with their authorization*; and be able to demonstrate a history of provision of emergency services in

* A letter from the relevant emergency services agency confirming your organisation's role in the emergency services sector will need to be included in your application if you are applying under category 2.

Applications must meet the VESEP funding criteria. This includes:

- The asset will enhance operational capability
- The group has the appropriate resources to house, operate and maintain the asset
- The asset will provide a net community benefit
- Funding for the asset has not been received under another program
- The group must meet their matched funding formula contribution, unless an exemption is approved.
- The group can demonstrate that the make and model of all equipment meets agency standards

Additionally:

- Eligible applicants may only apply for one grant (single application)
- The project must begin on or after the start of the funding allocation
- Funding should be fully expended by the end of 2026-27 financial year.

The Victorian Government encourages where possible and appropriate that grant recipients source their purchases from local businesses (Victorian or Australian).

VESEP will fund:

- Projects that seek to purchase operational equipment, vehicles or appliances that will be used by the organisation's volunteers and will support them to carry out their role.
- Projects that seek to undertake minor facility improvements on facilities used by volunteers that will support their role, such as amenity improvements (kitchen or change rooms) or refurbishments

VESEP will **not** fund:

- core budget requirements
- recurrent expenditure such as maintenance, operating costs associated with assets
- projects currently in progress
- project overspends.

Assessment of your Application

The VESEP Assessment Panel will review and prioritise your application.

Funding recommendations will be forwarded to the Minister for Emergency Services for approval.

Notification of Outcomes

After the formal assessment process is complete, all applicants will be notified in writing of the outcome of their application.

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A list of successful grants will be available on [EMV's website](#).

Need more Help?

Please contact us at emvgrants@justice.vic.gov.au.

Applicant Details

* indicates a required field

Organisation Name *

Australian Business Number (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	
Goods & Services Tax (GST)	
DGR Endorsed	
ATO Charity Type	More information
ACNC Registration	
Tax Concessions	
Main business location	

Must be an ABN.

Please select your LGA from the drop down list *

If your project covers more than one LGA please select Other and list all the relevant LGAs. If you are unsure which LGA you are located in, you can search the [Know Your Council](#) website using your street address. In instances where the organisation's head office is applying please select the LGA specific to the projects location.

Contact Details

Contact Name *

First Name

Last Name

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This will be the primary contact in relation to this application

Position *

Postal Address *

Address

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

Contact Number *

Must be an Australian phone number.
Include (03) for land line numbers

Contact Email *

Must be an email address.

Eligibility Criteria

To be eligible to apply for a grant under the agency category of 'Other', your organisation must be an emergency services volunteer group and:

- be a volunteer organisation/agency identified with nominated roles and responsibilities within the State Emergency Management Plan; or
- have in the past two years (prior to the application being made) performed a role or discharged a responsibility of an emergency services agency (as defined in the *Emergency Management Act 1986*) with their authorization*; and be able to demonstrate a history of provision of emergency services in

* A letter from the relevant emergency services agency confirming your organisation's role in the emergency services sector will need to be included in your application if you are applying under category 2.

Confirm how your organisation meets the eligibility criteria for the Other category of VESEP. *

Word count:

Must be no more than 300 words.

Attach any supporting documentation

Attach a file:

For example, a letter from an emergency services agency confirming role in emergency services sector.

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Project Details

* indicates a required field

Select the type of project you wish to fund *

- Operational Equipment
- Minor Facility Improvements
- Vehicles and Appliances

Select all relevant types for your grant application.

Provide a short project description *

Word count:

Provide a short description of what the grant will be used for (100 words recommended).

In instances where an organisation's head office is submitting applications for multiple local groups, please list the priority ranking of this application.

For example, Priority 1 of 10

Project Budget

If you are **registered** for GST, you should **not include GST** in the budget table below. Where applicable, EMV will pay the grant amount plus GST.

If you are **not registered** for GST, please ensure that the budget table below covers the total cost of your items **including GST** where applicable.

Description of items to purchase	Total cost of item
	\$
	\$
	\$
Provide details of what you are seeking to buy with the grant.	Must be a dollar amount.

Total Expenditure

\$

This number/amount is calculated.

This amount should match your response to Total Project Cost below.

Grant Amount Requested *

\$

Must be a dollar amount.

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

Applicant's Contribution *

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\$

Must be a dollar amount.

What is the total co-contribution that your organisation will make towards this project.

Total Project Cost *

\$

Must be a dollar amount.

What is the total cost of your project? This amount should match the calculated amount in the Total Expenditure field above.

Permits

Do you require building or planning permit(s)? *

Yes No

Have you obtained your planning permit(s)? *

Yes No

Upload permit(s) or relevant documents *

Attach a file:

When do you expect to obtain your building/planning permit(s)? *

Must be a date.

Supporting information *

Provide any further details regarding your building/planning permits.

Justification for Funding Requested

Explain why the funding and project are needed. *

For example, describe how the project will enhance operational capability. Supporting documents can be attached below.

Provide details on how the organisation's volunteers and the broader community will benefit from the project. *

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Describe what resources the organisation has in place to house, operate and maintain the equipment for its operational lifetime. *

For example resources could include: people in place to operate the equipment. The required training or certifications have been obtained. There is somewhere to store the equipment. The organisation has resources to cover any ongoing costs to store and/or maintain the equipment.

Do you expect to receive funding for the same project from another program? *

Yes No

"Another program" may include any other local, state or Commonwealth government grant program. This does NOT include the matched contribution from your organisation.

What is the name of the other program and how much funding will you receive? *

Please confirm that your organisation is able to meet the matched funding contribution requirement. *

Yes No

If this application is successful, your organisation is expected to contribute \$1 for each \$2 of VESEP grant funding. For example, to receive a grant of \$100,000 your matched contribution would be a minimum of \$50,000, to fund a project with a total cost of \$150,000.

Generally, an application is ineligible for VESEP funding where the applicant is not able to contribute the matched funding required.

However, EMV may take into consideration any significant factors relating to an organisation's ability to meet this requirement when reviewing the eligibility of your application.

Provide an explanation for why your organisation is requesting special access to the program. *

Any additional documents supporting your claim for special consideration can be attached at the end of the application form.

Confirm the amount of funding the organisation is able to contribute. *

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\$

Must be a dollar amount.

This amount should already be included in the budget section on the previous page. Please update the budget section if it differs from the amount you indicate here.

Please upload any additional evidence to support consideration of your request.

Attach a file:

Supporting Documentation

Attach quote(s) to support the funding requested *

Attach a file:

Recommended size no bigger than 5MB per file. Maximum of 25MB

Attach any further documents to support your VESEP application

Attach a file:

e.g. Letters of support, business case documents. Recommended size no bigger than 5MB per file. Maximum of 25MB

Please provide any other comments regarding your application

Declaration

* indicates a required field

By submitting this application form I declare that:

- the information provided in this form and attachments are, to the best of my knowledge, true and correct.
- the applicant matched funding contribution detailed in the Budget section is available for the project in the 2026-27 year.
- I understand any omission or false statement may result in the rejection of the application or withholding of any funds already approved.
- I understand the Department of Justice and Community Safety, Emergency Management Victoria, or its agent, may check any of the statements for the purpose of assessing this application, and I agree to provide any additional information requested.
- I understand this is an application only and may not result in funding approval.
- This application is endorsed by the organisation's Chief Executive Officer or equivalent.

Please fill in the details of the Chief Executive Officer or authorised officer as a sign they endorse this application.

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Name of Authorising Officer *

Title

First Name

Last Name

Position *

Phone Number *

Must be an Australian phone number.
Include (03) for land line numbers

Date *

Must be a date.