



Waterwise

Verge Subsidy

Give your verge a waterwise makeover

The Chief Executive Officer

City of Rockingham

PO Box 2142

ROCKINGHAM WA 6168

Applicant Details

Full name:	
Contact telephone number:	
*Email address:	

*I acknowledge and agree that the email address I have provided in lodging this application is the email address to which I will accept any communications from the City of Rockingham in relation to this application including remittance advice for the subsidy payment.

Property Details

Property Address:	
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How many plants did you plant?	
What size (in m ²) did you convert to a waterwise verge?	
What type of coverage was there before?	
How much did you spend on plants and materials?	
Bonus \$50 – has a neighbor participated too? Please provide their address(s).	



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Payment Details

Please provide your nominated bank details for an Electronic Funds Transfer (EFT) payment:

Account name:	
BSB:	Account number:

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Supporting Information

I confirm that:

- ☐ The information provided with this application is true and correct to the best of my knowledge.
- ☐ The waterwise verge development has been installed in accordance with the City of Rockingham's verge development policies and guidelines.
- ☐ I will comply with any direction by the City to modify or maintain the development in future if so requested.
- ☐ I commit to keeping my verge development in a safe and tidy condition.
- ☐ I have read and understand the terms and conditions of the waterwise verge subsidy.
- ☐ I have included all documentation in support of this application:
 - Before and after photos of my waterwise verge development.
 - Receipts associated with my waterwise verge development.

Please select the statement that best suits your situation:

- ☐ I am the owner of the property affronting the verge, or
- ☐ I am not, but I have their permission to develop it.

Signature:

Date:



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OFFICE USE SECTION ONLY

Assessed by: _____ Date: _____

Recommended subsidy payment: \$ _____ Signature: _____

Notes: