

Business Innovation Program (BIP) - Innovation Advisor - Expression of Interest

Form Preview

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* indicates a required field

Eligibility

In order to register as an Innovation Advisor for the [Business Innovation Program \(BIP\)](#) you must have read, understood and agreed to the Program's [Terms and Conditions](#).

An eligible Innovation Advisor will:

- Have a registered ABN.
- Have capacity to deliver professional advisory services to program participants.
- Demonstrate Value for Territory (how services directly create Value for Territory).
- Demonstrate previous experience successfully advising early stage innovators or developing innovation.
- Demonstrate a clear methodology to assist clients through problem framing, customer and solution validation and pitching their innovation.

Please Note:

- Approval is dependent upon satisfactory results of due diligence the Department may conduct (in its absolute discretion).
- Only approved Innovation Advisors will be published on the registered Innovation Advisors list.

If you require any assistance with completing this form, please contact innovation@nt.gov.au.

I have read, understood and agree to the Terms and Conditions *

(Yes)

Business details

Please use the below form to complete your Innovation Advisor expression of interest; the Department will use the below details to contact you should we require any additional information.

Legal entity name: *

Organisation Name

Legal entity name (not trading name).

Trading name: *

Can be the same as the legal entity name. This will be included on the website

Legal entity type: *

Company (Pty Ltd) Partnership Sole Trader Trust Incorporated Association Original Corporation

Entity type as shown on the ABN look up in this form.

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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.

Primary Address: *

Address

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

Postal Address: *

Address

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

Primary Phone Number:

*

Must be an Australian phone number. Please include area code.

Primary Email: *

Must be an email address.

Is your business based in the Territory? *

Yes

No

Please refer to the program terms and conditions for Territory Enterprise definition

Are you registered as an NTG Vendor? *

Yes

No

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NTG Vendor ID Number (if known):

You can leave this blank for now. However you will need a vendor ID to be paid by NTG.

NTG Vendor registration

We recommend registering to become an NTG Vendor by visiting the [InvoiceNTG website](#).

To receive payments from the Northern Territory Government (NTG) you will be required to be registered as an NTG Vendor.

Should you have any questions with registering to be an NTG Vendor, DCIS accounts payable can be contacted on freecall 08 8943 6237 between 8am and 4.30pm Monday to Friday, excluding public holidays.

Trust entities

If your Legal Entity is a **Trust**, you will need to upload a copy of the Trust Deed to provide confirmation of who is your Trustee.

Legal Entity name in the Business details section should be written as;

ABC Pty Ltd the trustee for ABC Family Trust

or

John Smith the trustee for ABC Family Trust

Copy of Trust Deed *

Attach a file:

Advisory Services

Please select one of more of the options below.

You will be asked for further details to check your eligibility to be an Advisor for each stage selected.

I would like to be a Stage One Advisor

Yes

Stage one outcome is a completed Innovation Pitch Plan and pitch deck. The role of a Stage One Advisor is to support the Eligible Recipient through problem framing, customer and solution validation, and how to pitch innovation.

I would like to be a Stage Two Advisor

Yes

Stage two outcome is a fully developed and investible Minimum Viable Product. The role of a Stage Two Advisor is to support the Eligible Recipient to develop their MVP through the implementation of their Innovation Project Plan

I would like to be a Stage Three Advisor

Yes

Stage three outcome is third party investment. The role of a Stage Three Advisor is to support the Eligible Recipient to develop a pitch deck for the purpose of pitching for investment

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Website information

In addition to your organisation's trading name, the below information will be published on the [website](#) under the list of Innovation Advisors for the purpose of this program.

Contact person: *

Title	First Name	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>

Contact person for supplier inquires

Contact phone number: *

Must be an Australian phone number.
Please include area code. Contact number for supplier inquires

Contact email address: *

Must be an email address.
Contact email for supplier inquires

Website:

Must be a URL.

Organisation Logo:

Attach a file:

Contact person for supplier inquires

Please provide a brief bio on your organisation and your experience successfully advising early stage innovators: *

Word count:
Must be no more than 100 words.
Must be no more than 100 words.

List any areas of special interest or expertise:

e.g. technology, business configuration, Aboriginal enterprise, etc.

Please provide a brief overview of services offered that will assist clients in the development of their Innovation Project Plan, pitch, and Minimum Viable Product: *

e.g. one-on-one advisory services, online course, group workshop, blended, etc.

What modes of contact do you offer applicants: *

- Phone
- Virtual Meeting
- Face to Face
- Other:

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Stage One Advisor

Please provide clear detail of the methodology used to assist clients through problem framing, validation and pitching of their innovation: *

Please provide an overview of your service and inclusions for Stage One advisory services: *

NTG will contribute up to \$2,000 towards advisory services in Stage One; any difference in value is to be negotiated between the Advisor and the Eligible Recipient

What is your fee for Stage One advisory services (excluding GST): *

Must be a dollar amount.

Stage Two Advisor

Please provide an overview of your experience in assisting early stage start ups to develop an investment ready Minimum Viable Product: *

Please provide an overview of your service and inclusions for Stage Two advisory services: *

Please note, a comprehensive quote for Stage Two advisory services must be included as part of the Eligible Recipients Innovation Project Plan submitted during Stage One

What is your fee for Stage Two advisory services (excluding GST): *

Must be a dollar amount.

Unit *

Please complete if fee for stage two is a unit; e.g. package rate, hourly rate, subscription

Stage Three Advisor

Please provide an overview of your experience developing tools to pitch for investment: *

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Criteria

Please provide an overview of how your organisation provides Value for Territory:

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Examples of VFT are employing Territorians or creating new jobs for Territorians (including increased Aboriginal participation), regional development, development of territory culture, support for disadvantaged people or groups and attracting new investment to the Territory (may include proposed value if successful in becoming an Innovation Advisor)

Provide detailed overview of how your organisation has successfully advised early stage innovators in the past: *

Please attach any supporting documentation

Attach a file:

Unattested Declaration under the Oaths, Affidavits and Declarations Act

I (insert your full name),

*

solemnly and sincerely declare:

- I have read, understood and agree to comply with the Terms and Conditions of the Business Innovation Program ("BIP"/ "Program");
- I have read, understood and agree to the Privacy Statement;
- I understand some business/organisation and contact information that we give to the Department as part of this application may be listed publicly and I acknowledge the disclaimer regarding how the information I provide will be stored and used;
- By completing this declaration I confirm that my business is not under external administration or in liquidation, is not insolvent and I have no reason to believe that it will become insolvent during the course of the program;
- My business is not currently being investigated by any law enforcement agency for fraud, including without limitation for Work Health or licensing related matters;

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- I understand and consent to the Department conducting any due diligence in relation to my business as it sees fit, and that the Department has a discretion to remove my business from the panel of providers for any reason whatsoever (after providing my business reasonable opportunity to answer any allegations of poor quality work or other breaches of the terms and conditions);
- In the event that my business is successful in being registered as an Advisor for the program, I understand that the information submitted in this application will form part of the terms and conditions of any subsequent contract for the provision of advisory services;
- I will advise the Department immediately if any details relating to my business/ organisation changes during the course of the Program;
- No offer of cashback or any other benefit (whether monetary or not) has been made to me, my business/ organisation or any related third party as a condition of acceptance of a quotation given to for works undertaken on the premises during the course of the Program;
- My business has, and will maintain in force, all required permits, licences, insurances relevant to the conduct relating to participation in the Program of my business;
- I understand that the Department may seek further information and evidence of certificates of currency for professional indemnity and/or public liability insurance where appropriate;
- There is no relationship between any member of my Business and the entity we are providing the quotation or services to (refer definitions of Related and Relative in the terms and conditions);
- I understand that my business must comply with all laws relevant to my business's participation, including the obligations on persons to report unlawful activity under the Independent Commissioner against Corruption Act (NT);
- I have read, understood and fully accept these Terms and Conditions and fully release and indemnify the Department against any loss or damage he / she / it / they may suffer of any nature whatsoever (including without limitation personal injury or death) caused or contributed to by participation in the Program, the conduct or delivery of any Works, Goods or Services or otherwise;
- My business/ organisation fully releases and indemnify the Department against any loss or damage they may suffer of any nature whatsoever (including without limitation personal injury or death) caused or contributed to by participation in the Program;
- The applicant and its personnel who are or will be located in the Northern Territory when the project is operational are fully vaccinated for COVID-19 or be able to supply written evidence of a medical exemption;
- The applicant maintains processes, systems and records (including a register if required) of its personnel's vaccination status and exemptions, and grant the Department permission to view those processes, systems or records on our request;
- All information contained in this application together with any attachments are complete, true and correct to the best of my knowledge;
- I acknowledge that any incorrect or misleading information submitted in this application may result in this application being rejected and/or legal action being taken against the applicant;
- I am a principal of the business/ representative of the organisation and I am duly authorised to make this Declaration.

This declaration is true and I know that it is an offence to make a declaration that is false in any material particular. *

Yes

This Declaration is made at *

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place eg. Darwin

Name *

Title First Name Last Name

<input type="text"/>	<input type="text"/>	<input type="text"/>
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Must be the Principal of the Business

Date of Birth *

Must be a date.

Position *

Date of declaration *

Must be a date.