# GATE 0 Project JUSTIFICATION REPORT

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| **PROJECT/PROGRAM NAME:** | [Project name] |
| **PORTAL PROJECT ID:** | [Project ID from NSW Assurance Portal] |
| **SENIOR RESPONSIBLE OFFICER:** | [Name of sponsor agency’s nominated SRO] |
| **AGENCY HEAD:** | [Name of sponsor agency’s Secretary or CEO] |
| **SPONSOR AGENCY:** | [Name of sponsor agency] |

*Agencies are to complete a Project Justification Report within two weeks of registering the project on the NSW Assurance Portal. This Report is due to Infrastructure NSW no less than 5 business days after the determination of the project’s risk tier by the INSW Risk Review Advisory Group (RRAG).*

*The Gate 0 Gateway Review assessment process is outlined in the Gate 0 Workbook.*

COST ranges:

The agency is to provide guidance as to the estimated range of cost for the next stages of the project (including an estimate that includes forecast internal and external costs combined):

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| **OVERALL ETC RANGE** | **STRATEGIC BUSINESS CASE COST** | **FINAL BUSINESS CASE COST** |
| ETC Range | SBC Cost. | FBC Cost. |
| **INTENDED FUNDING SOURCE FOR FBC:** | [Commentary on likely source of funds] | |
| **INTENDED FUNDING SOURCE FOR DELIVERY:** | [Commentary on likely source of funds] | |

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| Government priority |
| *How has NSW Government identified the proposed project as a strategic priority?* |
| [Provide detail on the NSW Government’s priority for the project. This can include policies and strategies to which the project is aligned. Cabinet-endorsed strategies, policies, election commitments or decisions will attract a higher score. Briefly describe how this project assists in achieving the NSW Government’s current objectives.] |

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| Criticality of Service Need | |
| *How critical is the service need, or how urgently does the community need it?* | |
| [Succinctly define the identified problem or service need (6-8 sentences). This should include the urgency or the criticality of the need and likely impacts on the community if action is not taken.] | |
| **Supporting evidence of problem or service need is attached:** | Choose an item. |

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| Strategic Asset management | |
| *How does the proposed project align with the agency’s strategic asset management plan, asset management plan or agency equivalent?* | |
| [Briefly describe how the agency’s asset management plans (or equivalent documents) provide evidence of the need for this project.] | |
| **Relevant extracts from asset management plans (or equivalents) are attached:** | Choose an item. |

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| Alternatives: |
| *How has the project considered non-asset solutions or augmentation of existing assets?* |
| [Comment on why an asset solution has been proposed (accounting for the early stage of project development)] |

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| Planning, PRECINCTS and interfaces |
| [Any comment on interface with other existing or planned projects, is the project an enabler of other projects, are there inter-agency cooperation issues, project’s fit into a network or precinct and if there is a realistic planning pathway.] |

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| Agency COMMENTS |
| [Any further comments] |

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| AGENCY EXECUTIVE ENDORSEMENT  (SECRETARY/CEO OR DELEGATE): | [Name and position] |