## Local Grant Application Form

# Rawene Service Centre 1 2 MAR 2019 RECEIVED



#### Instructions

#### Please read carefully:

- Read this application form in full before you start filling it in. It is easier to complete an
  application if you have the information you need at your fingertips.
- Please see Section 1 of the Community Grant Policy to ensure you are eligible.
- All applications are to be submitted 15 clear working days prior to the Community Board meeting where the application will be considered. Deadlines dates are on Council's website <a href="www.fndc.govt.nz">www.fndc.govt.nz</a>
- Incomplete, late, or non-complying applications will not be accepted.
- Applicants who have failed to complete a Project Report for previous funding granted within the last five years are not eligible for funding.
- If there's anything on this form you're not sure of, please contact the Governance team at DDI (09) 401 5231, freephone 0800 920 029, or <a href="mailto:governance@fndc.govt.nz">governance@fndc.govt.nz</a> we're happy to help.
- Send your completed form to governance@fndc.govt.nz or to any Council service centre

## The following <u>must</u> be submitted along with this application form:

$\nabla$	Quotes (or evidence of costs) for all items listed as total costs on pg 3
	Most recent bank statements and (signed) annual financial statements
$\checkmark$	Programme/event/project outline
$\checkmark$	A health and safety plan
	Your organisation's business plan (if applicable)
	If your event is taking place on Council land or road/s, evidence of permission to do so
abla	Signed declarations on pgs 5-6 of this form

#### Applicant details Number of Members Organisation Hokianga Environmental Protection Group 130 Postal Address c/o PO Box 19, Rawene Post Code 0443 no postal Post Code Physical Address c/o 279 Classen Road, Omanaia delivery Position Organiser Contact Person Gail Aiken Phone Number 09 405 7787 Mobile Number gailaiken20@gmail.com **Email Address** Please briefly describe the purpose of the organisation. To promote practices that maintain and contribute to the health and well-being of the environment of Hokianga and it's communities



## **Application Form**

## **Project Details**

Which Community Board is your organisation applying to (see map Schedule A)?								
	Te Hiku	□	Kaikohe-Hokianga				ls-Whanga	ıroa
Clearly describe the project or event:								
Name of Activity	Real Food Hok	ianga				Date	Saturda	ay 11th May
Location	Location Rawene Hall and RAD					Time	10am to	4pm
Will there be a ch	arge for the public to	o atten	d or participate in the	project or e	event?		☐ Yes	☑ No
If so, how much?								
Outline your act	ivity and the servic	es it w	ill provide. Tell us:					
• Who	will benefit from the	e activit	y and how; and					
<ul> <li>How</li> </ul>	it will broaden the r	ange o	f activities and experi	ences avai	lable to	the cor	mmunity.	
Hokianga is a lo	w socio economic a	rea an	d many people strugg	le to provi	de heal	thy foo	d for their	families, there is a
great deal of fo	od related illness	and m	any people are in t	ne habit o	f eating	g low o	uality, jur	nk food. The aim
of the event is	not only to demon	strate	what can be produ	ced locall	y but a	lso to a	assist ped	ople to gain skills
and knowledge	e in food preparation	on, pre	eservation, ferment	ation, hea	lthy dri	nks, lo	w cost co	ooking etc. and
to encourage p	people to produce	more	of their own food. V	le also wa	ant to ir	ncreas	e awaren	ess of the
environmental impact of our current food production system, how it contributes to climate change and how we can								
make our comm	unity healthier and i	more re	esilient through health	ny, local fo	od.			
This event is of	huge potential bene	fit to ar	nyone from Hokianga	and beyor	nd. This	will be	the 4th Ro	eal Food Hokianga
and the previous	s events were very s	succes	sful bringing in hundr	eds of peo	ple from	acros	s our com	munity and beyond
to celebrate what can be grown here and to learn and share skills associated with healthy food. A video of our 2017								
event can be found here https://www.youtube.com/watch?v=K49VgKsnCDc								
Each year the event builds on the previous year connecting with more people. Previous events were well attended								
by a broad cross section of the community and we had excellent feedback including from local health professionals.								
The event is fully organised by volunteers and we are seeking funding to assist with costs associated with the event.								
We are a small but active group and are committed to keeping this important event free of charge to the public.								

We have successfully organised this event 3 times already and had funding from the Kai Ora fund in 2017



## **Application Form**

## **Project Cost**

Provide a detailed costs estimate for the activity. Funding requested may not exceed 50% of the total cost.

Total Cost - provide the total amount of the estimated quoted cost against the appropriate item.

Amount Requested - provide (against the item) the amount the Board is being requested to contribute.

#### Please Note:

- You need to provide quotes (or evidence of costs) for everything listed in the total costs column
- If your organisation is GST registered, all requested amounts must be GST exclusive.
- Do not enter cents round the values up or down to the nearest dollar
- Do not use the dollar sign (\$) just enter the dollar value
- If you are applying for operating costs of a programme, please attach a programme outline

Expenditure	Total Cost	Amount Requested
Rent/Venue Hire	300	300
Advertising/Promotion	40	40
Facilitator/Professional Fees <sup>2</sup>		
Administration (incl. stationery/copying)	1260	1260
Equipment Hire		
Equipment Purchase (describe)		o V
Utilities		
Hardware (e.g. cement, timber, nails, paint)		
Consumable materials (craft supplies, books)		
Refreshments		
Travel/Mileage		
Volunteer Expenses Reimbursement	400	400
Wages/Salary		not applicable
Volunteer Value (\$20/hr)	2760	not applicable
Other (describe)		
TOTALS	4760	2000

<sup>&</sup>lt;sup>2</sup> If the application is for professional or facilitator fees, a job description or scope of work must be attached.

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## **Application Form**

Financial information				
Is your organisation registered for GST?	☐ Yes	☑ No	GST Num	ber
How much money does your organisation c	urrently hav	e?		252.98
How much of this money is already committ	ed to specif	ic purposes	?	38.61
List the purpose and the amounts of money	already tag	ged or comm	nitted (if any	y):
	Section 201			
Purpose				Amount
Purpose  Money owed for licence to screen a filr	n in Rawei	ne	38.61	Amount
	n in Rawei	пе	38.61	Amount
	n in Rawei	ne	38.61	Amount
	n in Rawei	ne	38.61	Amount

Please list details of all other funding secured or pending approval for this project (minimum 50%):

Funding Source	Amount	Approved
		Yes / Pending
-		Yes / Pending

Please state any previous funding the organisation has received from Council over the last five years:

Purpose	Amount	Date	Project Report Submitted
			Y / N
			Y / N
			Y / N
			Y / N



## **Application Form**

## **Privacy Information**

The information you have provided on this form is required so that your application for funding can be processed. Once this application is lodged with the Council it becomes public information and may be made available on the Council's website. If there is sensitive information in the proposal or personal details you wish to be withheld, please advise. These details are collected to inform the general public and community groups about all funding applications which have been submitted to the Far North District Council.

## **Applicant Declaration**

This declaration must be signed by two people from your organisation who are 18 years of age or older with the authority to sign on behalf of the organisation. Signatories cannot be an undischarged bankrupt, cannot be immediately related, cannot be partners, and cannot live at the same address. They must have a daytime contact phone number and be contactable during normal business hours.

On behalf of: (full name of organisation)

## Hokianga Environmental Protection Group

#### We, the undersigned, declare the following:

In submitting this application:

- 1. We have the authority to commit our organisation to this application and we have been duly authorised by our governing body.
- 2. We acknowledge and agree that the Far North District Council may disclose or obtain information related to the funding of the organisation from any other government department or agenda, private person, or organisation.
- 3. We have attached our organisation's most recent statement of income and expenditure, annual accounts, or other financial documents that demonstrate its ability to manage a grant.
- 4. Individuals associated with our organisation will not receive a salary or any other pecuniary gain from the proceeds of any grant money arising from this application.
- 5. The details given in all sections of this application are true and correct to the best of our knowledge, and reasonable evidence has been provided to support our application.
- We have the following set of internal controls in place:
  - Two signatories to all bank accounts (if applicable)
  - A regularly maintained and current cashbook or electronic equivalent
  - A person responsible for keeping the financial records of the organisation
  - A regularly maintained tax record (if applicable)
  - A regularly maintained PAYE record (if applicable)
  - The funding and its expenditure shown as separate entries in the cash book or as a note to the accounts
  - Tracking of different funding, e.g. through a spreadsheet or journal entry
  - Regular financial reporting to every full meeting of the governing body

Signatory One	Λ	Signatory Two
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## **Application Form**

#### We agree to the following conditions if we are funded by Local Community Grant Funding:

- To uplift any funding granted within 3 months of the date on the letter of agreement. Failure to do so will result in loss of the grant money.
- 2. To spend the funding within 12 months of the date of grant approval unless written approval for an extension is obtained from Council before that 12 month period ends.
- 3. To spend the funding only for the purpose(s) approved by Far North District Council unless written approval for a change of purpose(s) is obtained **in advance** from the Community Board.
- 4. To return to the Far North District Council any portion of the funding that we do not spend. If our payment includes GST we will return the GST component of the amount to be returned.
- 5. To acknowledge the receipt of Community Board funds as a separate entry in our accounts, or in a note to our accounts, in our organisation's annual report.
- 6. To acknowledge any financial contribution from Far North District Council on signage and in any publicity relating to the project. Contact Governance Support for digital imagery.
- 7. To make available any files or records that relate to the expenditure of this funding for inspection if requested by the Far North District Council or its auditors.
- 8. To complete and return a Project Report within **two months** of the end of the project, or, if the activity is ongoing, within two months of the funding being spent. Applicants who fail to provide a project report within this timeframe will not be considered for funding for stand-down period of five years.
- 9. To inform the Far North District Council of significant changes in our organisation before this application has been considered, or the funding has been fully used and accounted for (such as change in contact details, office holders, financial situation, intention to wind up or cease operations, or any other significant event).
- 10. To lay a complaint with the Police and notify the Far North District Council immediately if any of the funding is stolen or misappropriated.

#### Signatory One Position Name Gail Aiken Organiser Post Code 0443 Postal Address PO Box 19, Rawene Phone Number 09 405 7787 Mobile Number n/a Signature Date Signatory Two Name Kirsty Joiner Position Organiser P.O. Box 26, Rawlene Post Code 0443 Postal Address 09 405 7631 Phone Number Mobile Number Mard 2019 touner Signature

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