

Application Form

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 <u>Community Grant Policy</u> 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 www.fndc.govt.nz
- 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 governance@fndc.govt.nz we're happy to help.
- Send your completed form to governance@fndc.govt.nz or to any Council service centre

The following must be submitted along with this application form:

Quotes (or evidence of costs) for all items listed as total costs on pg 3

Most recent bank statements and (signed) annual financial statements

Programme/event/project outline

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

□ Signe	ed declarations on pgs 5-6 of this form	
Applicant d	etails	
Organisation	BOI ANIMAL RESCUE TRUST Number of Members	
Postal Address	c/o 52 GILLIES ST, KAWANAWA Post Code OZIO	
Physical Address	Post Code	
Contact Person	SAN STEWART Position POWN (PRENTS	
Phone Number	Mobile Number 0Z26i32317	
Email Address	Seedy-Ropa hotmail.com	
Please briefly describe the purpose of the organisation.		
TO 805	SCUE ABADOONED ADIMALS, DESEY & REHOME THEM.	



Application Form

Project Details

Which Communi	ty Board is your organisation applying to (see map Schedule	A)?
	Te Hiku 🔲 Kaikohe-Hokianga 🗡 Bay o	of Islands-Whangaroa
Clearly describe	the project or event:	
Name of Activity	BARK IN THE PARK 2020	Date 16th FG3 2020
Location	UK RUGBY CUB KAJAKAJA	Time an - 4pm
Will there be a cha	arge for the public to attend or participate in the project or event?	✓ Yes □ No
If so, how much?	GOLD COINS DONATIONS FOR DO	SHOW, PHOTOS ETC
Outline your acti	vity and the services it will provide. Tell us:	

- Who will benefit from the activity and how; and
- How it will broaden the range of activities and experiences available to the community.

PRIMARILY FUNDRAISE FOR THE TO SIMPLY OF CONCENDED DOLLOW SO WAS IP ADDITION IT PROVIDES MUCH NOEDED RESPONSIBLE DOG OWNERSHIP Buruss STRONGER TOGETHE2 RESIDENTS SOCIO ECONOMICS EGMENTS NORTHUNDO REGION. ALL TOGETHER THESE 8 INTEREST IN THER PETS THROUGHOLT THE WELFARE ADIMALS TIME Q-NOOZTH. SHOWCASED OUR COMMUNITY THE GVENT CELEBRATES FAR NORTH THE of LIVING IT IS THE OWLY EVENT Kinoo CF 175





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	173	173
Advertising/Promotion	1196+957 = 137540	1375.40
Facilitator/Professional Fees ²		
Administration (incl. stationery/copying)	300	300 1900
Equipment Hire	1900	1900
Equipment Purchase (describe)		
Utilities	-	
Hardware (e.g. cement, timber, nails, paint)		
Consumable materials (craft supplies, books)		
Refreshments	230	230
Travel/Mileage		
Volunteer Expenses Reimbursement		
Wages/Salary		not applicable
Volunteer Value (\$20/hr)	_	not applicable
Other (describe) Original budget	- submitted Septen	nber 2019
TOTALS	3980 -	3980

² If the application is for professional or facilitator fees, a job description or scope of work must be attached.



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Expenditure	Total Cost	Amount Requested
Rent/Venue Hire	100 -	100
Advertising/Promotion	2000 -	2000
Facilitator/Professional Fees ²	-/8	
Administration (incl. stationery/copying)	300-	300 -
Equipment Hire procedures.	1500 -	1500 -
Equipment Purchase (describe)	A/A	NA
Utilities	~/A	NA
Hardware (e.g. cement, timber, nails, paint)		
Consumable materials (craft supplies, books)	*	
Refreshments	12000 230 GB	230. G.B
Travel/Mileage	2/4	
Volunteer Expenses Reimbursement	12/A	
Wages/Salary	2/1	not applicable
Volunteer Value (\$20/hr)	200 hrs 4,000	not applicable
Other (describe) Updated bu	dget provided Dec	ember 2020
TOTALS	8100	4130

² If the application is for professional or facilitator fees, a job description or scope of work must be attached.

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Financial Information				
Is your organisation registered for GST?	□ Yes	No	GST Number	
How much money does your organisation curr	ently hav	/e?		2400
How much of this money is already committed to specific purposes?			?	2400

List the purpose and the amounts of money already tagged or committed (if any):

Purpose	Amount
DESEXING	2400
TOTAL	

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

Funding Source	Amount	Approved
		Yes / Pending
		Yes / Pending
r/A		Yes / Pending
		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
WA			Y / N
			Y / N
			Y / N





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)



We, the undersigned, declare the following:

In submitting this application:

- 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.
- 6. 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	Signatory Two
Ma Can	Mollonger
))(011)	Monday

www.fndc.govt.nz | Memorial Ave, Kaikohe 0440 | Private Bag 752, Kaikohe 0440 | ask.us@fndc.govt.nz | Phone 0800 920 029



Application Form.

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

- 1. 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.
- 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.
- 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.
- 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 Or	ne de la contraction de la con
Name	SAM STEWGRIT Position Porms/EVENTS
Postal Address	3/378 PANARU ROAD, VALANALA Post Code 0282
Phone Number	Mobile Number 0276132317
Signature	Date 22/8/19
Signatory Tv	NO
Name	Kate Mararay Position Secretary.
Postal Address	27 Johnston Road, Kawarana Post Code 0210.
Phone Number	09 404 0842 Mobile Number
Signature	Date 22/8/19.
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