KTS. 3949283.

Kerikeri Service Centre
29 APR 2019

Local Grant 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 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 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
- ☐ Signed declarations on pgs 5-6 of this form

Applicant details

Organisation	NORTHLAND AREA OF FASNZ	Number of Members	79
Postal Address	PO BOX 486, KERIKERI	Post Code	0230
Physical Address	13 PA RD KERIKERI	Post Code	0245
Contact Person	LYN READ	Position	TREASURER
Phone Number	09 407 5455	Mobile Number	021 793337
Email Address	Lynread42@gmail.com		

Please briefly describe the purpose of the organisation.

TO ENCOURAGE, STIMULATE AND PROMOTE PARTICIPATION IN THE ART OF FLORAL DESIGN AND APPRECIATE ITS CULTURAL VALUE

Local Grant Application Form

Project Details

Which Community Board is your organisation applying to (see map Schedule A)?

☐ Te Hiku ☐ Kaikohe-Hokianga ☑ Bay of Islands-Whangaroa

Clearly describe the project or event: KERIKERI FLORAL ART GROUP the Host Club

Name of Activity: FLORAL ART DESIGNER OF THE YEAR — Date: 16-17-18 Oct 19

Location: TURNER CENTRE, KERIKERI — Time: FRI 18 Oct 10:00 15:00

Will there be a charge for the public to attend or participate in the project or event? ☑ Yes ☐ No

If so, how much? $5 ENTRY ~~TO~~ WHEN

Outline your activity 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.

The Designer of the Year is a competition to find the best Floral Design (technically and artistically) in four different categories; Open, Senior, Intermediate and Novice. Entrants come from 4 groups in Northland; Whangarei, Kerikeri, Doubtless Bay and Kaitaia. This year it is the turn of Kerikeri to host the event.

The event is open to the general public after judging is finished and we hope to encourage and promote participation in the Art of Floral Design and to teach about plants both indigenous and exotic.

We also hope to encourage floral Design as a recreational and social activity for all age groups in Northland.

Date of Event – Host Kerikeri Floral Art Group At Turner Centre. 16/17 October 2019 Public 18 October.

Local Grant 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		
Advertising/Promotion		
Facilitator/Professional Fees[2]	ATTACHED Budget	
Administration (incl. stationery/copying)		
Equipment Hire		
Equipment Purchase (describe)		
Utilities		
Hardware (e.g. cement, timber, nails, paint)		
Consumable materials (craft supplies, books)		
Refreshments		
Travel/Mileage		
Volunteer Expenses Reimbursement		
Wages/Salary		not applicable
Volunteer Value ($20/hr)		not applicable
Other (describe)		
TOTALS		

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

Local Grant Application Form

Financial Information

Is your organisation registered for GST? ☐ Yes ☑ No GST Number

How much money does your organisation currently have? See attached Bank statement

How much of this money is already committed to specific purposes? $1000.00 Unit Design

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

Purpose	Amount
Several Members attending over several Months to attain the Unit Design Exam. Members who pass then become to pass their tutor and Demo Members within the Northland Girls	
TOTAL	$1000.00

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

Funding Source	Amount	Approved
FAR North District Council.		~~Yes~~ / Pending
Local Grant		~~Yes~~ / Pending
Local Kerikeri Business		~~Yes~~ / Pending
Raffles / Door Entry		~~Yes~~ / Pending
Public Demonstation		~~Yes~~ / Pending

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

Purpose	Amount	Date	Project Report Submitted
Designer of the Year	500.00	2014	Y / ~~N~~
Designer of the Year	500.00	2015	Y / ~~N~~
			Y / N
			Y / N

FLORAL ART NORTHLAND DESIGNER OF THE YEAR 16/17/18/ 0CT0BER 2019

VENUE TURNER CENTRE COBHAM ROAD KERIKERI

Judge Francine Thomas "a Floral Affair "from Tauranga Worldwide Judge, Tutor and Demonstrator

	BUDGET INCOME	ACTUAL
Door Entry opens to public	500.00	
Raffle sales	400.00	Pending
Business Sponsorship Raffles and Advertising	200.00	
Award Dinner and Prize giving	1750.00	
Public and Members entry to Demonstration	700.00	
Grants @ Funding		
	TOTAL $3550.00	

EXPENDITURE	**BUDGET**
QUOTE Tuner Centre Venue	623.88
Rugby Club Venue Awards Dinner	120.00
Judges Accommodation 2 nights	320.00
Judges meal Allowance 2 days	200.00
4 hours Judging @40.00 hour	200.00
Francine Public and Members Demonstration 3 hours	250.00
Sundries for Demo	125.00
Flower Allowance	300.00
Francine's travel allowance from Tauranga and return 880 kl	528.00
Appreciation for 2 Stewards	100.00
Prize Giving Rosette's	80.00
Signwriting signs Advertising	150.00
Printing Programmers', Poster's, show cards and certificates	360.00

Engraving trophies	95.00
Winner's Bouguet and Corsages	100.00
Thank you Gift Basket Judge	35.00
Raffle Tickets/ Pens/ Stationary	60.00
Masking Tape for Marking Floor	20.00
Award Dinner's Caterer's	1750.00
Hire tables /tablecloths	261.00
Cups/serviettes	50.00
Tea, Coffee/ Milk /Sugar	75.00
Non-Alcohol punch awards Dinner and nibbles	125.00
	TOTAL $5927.88

Local Grant 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)

NORTHLAND AREA FLORAL ART SOCIETY NZ.

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.
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

Local Grant 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.
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

TREASURER - FLORAL ART NORTHLAND

Name	Lyn Read	Position	President Kerikeri Floral A
Postal Address	P.O Box 486 Kerikeri	Post Code	0245
Phone Number	09 4075455	Mobile Number	021079 3337
Signature	L B Read.	Date	29-04-2019

Signatory Two

Name	PATRICIA WATERS	Position	SECRETARY
Postal Address	4 PICKMERE LANE	Post Code	0230
Phone Number	09401799	Mobile Number	0274965320
Signature		Date	29-04-2019.