

#### Instructions

NORTHLAND

#### Please read carefully:

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- 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.
- If there's anything on this form you're not sure of, please contact the Governance team at DDI (09) 401 5188, freephone 0800 920 029, or <a href="mailto:governance@fndc.govt.nz">governance@fndc.govt.nz</a> we're happy to help.
- Please see Section 1 of the Community Grant Policy to ensure you are eligible.

Two quotes for purchases where practicable, or evidence of expected purchases

- All applications are to be submitted 15 clear working days prior to the Community Board meeting where the application will be considered.
- 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.

## The following must be submitted along with this application form:

Business plan (including project costs)

Signed applicant declaration

Details of all other funding secured or pending approval for this project (minimum 50%)				
<ul> <li>Programme outline (if applying for operating costs)</li> </ul>				
☐ A health and safety plan				
Applicant details				
Organisation OhCHECIWÎN TOICIMON RESIDENTS ASSENUMBER of Members Community				
Postal Address 6 Hobson SMRF OhCIECUXU KUKA Bost Code 0472				
Physical Address Olo Cilcove Post Code 9472				
Contact Person Tracey Albert Position Characters				
Phone Number 094059717 Mobile Number 0274921878				
Email Address Tracecyalbert DXNa. CO. nz				
Please briefly describe the purpose of the organisation.				
OTRA is all about Community Providing safety				
Twell being of our green - purchasing solar				
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www.fndc.govt.nz   Memorial Ave, Kaikohe 0440   Private Bag 752, Kaikohe 0440   ask.us@fndc.govt.nz   Phone 0800 920 029				

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#### NORTHLAND

# Local Community Grant Fund 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:
Name of Event TCICIMCII Day Date 30 MCMCL 201
Location Chalanta Time 8am
Are you applying for annual funding for the remaining years of the triennium¹?
If so, how much?
Outline your project and the services it will provide. Tell us:
How it will enhance access to facilities and for whom
<ul> <li>How it will broaden the range of activities and experiences available to the community</li> </ul>
How it will enhance/communities or volunteer capability to provide services.
We are a small town that needs
communitys gathering to maintain
The connection between familys and
This & Bis Silver Distrois
11 & Small Quet 15 SO Importont to
Weo I Sillage
Talama Pouls count be bold of the
30th march 2019 of Objection
Punds made thought this even one
back no the community.

<sup>&</sup>lt;sup>1</sup>The triennium refers to the three-year period between local elections.



#### **Project Cost**

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

<u>Total Cost</u> - 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:

- 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

	1 - 5 - Third Galling		
Total Cost	Amount Requested		
( 350			
	350		
Dau	620		
350	250		
3.30	350 JOHNTON		
320	220		
1.00	320		
406	406		
11:85	not applicable		
7700	The second secon		
26-	not applicable		
350	350		
3881.	2396		
-	Total Cost  8. 350  6. 620  3.50  4.06  74.85  350  3881.		

<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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#### NORTHLAND

# Local Community Grant Fund Application Form



Fillandal Information		0.635 (5.655)		
Is your organisation registered for GST?	' ☐ Yes	☑ No	GST Number	
What are your organisation's currently a	1 1		100	S All Book
How much of this is tagged or committee	d for specific pu	nest-a	thetect	, , , , , , , , , , , , , , , , , , , ,
List the purpose and the amounts of money already tagged or committed (if any):				
Purpose	merekasi persanak			Amount
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RI) deliver, pho	e e	agen	1	

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

Funding Source	Amount	Approved
no other Roding		Yes / Pending
applied & a	cut Non	Yes / Pending
this gra	11	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
Muanai Day Talamai Day	\$1500 \$10500	MUL 20	7 Y / N
	cont remen	se.	Y / N Y / N

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#### 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)

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		-18 <i>PS101D1</i> D1-15SV171D162
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#### 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 out 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



## 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.
- 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.
- To acknowledge any financial contribution from Far North District Council on signage and in any publicity relating to the project.
- 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.
- To notify the Far North District Council immediately if our GST status changes.

# Signatory One Name 21 Tracey Albert Position Charperson Postal Address D6 Hobson Street Onceanar Post Code Phone Number 0274921878 Mobile Number 09 4059717 Signature JCALBERT Date 26-1-19 Signatory Two (if applicable) Name 21 Charbert Position Community Member Postal Address 18 Remem Settlement RS Charlette Post Code Phone Number 02280035 Mobile Number Signature Date 26-1-19

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