

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 Community Development team at freephone 0800 920 029, or funding@fndc.govt.nz - we're happy to help.
- Send your completed form to funding@fndc.govt.nz or to any Council service centre The following <u>must</u> be submitted along with this application form:
 - Quotes (or evidence of costs) for all items listed as total costs on pg 3
 - V 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 of	letails		
Organisation	KAIKOHE AND DISTRICTS SPORTSVILLE Number of Members		
Postal Address Physical Address	POBOX 222 Karkohe OLOS 11 Penney Crescent Karkoho Post Code Post Code Post Code		
Contact Person Phone Number	Debbie Raphael Position FACILITIES COORDINATES OZI 0821 1637 Mobile Number		
Email Address	admin @ kaikohesport.org.nz		
To create, encourage and promote sporting and recreational opportunities in Karkohe and for the wider community			
www.fndc.govt.nz N	Jemorial Ave, Kaikohe 0440 Private Bag 752, Kaikohe 0440 funding@fndc.govt.nz Phone 0800 920 029		

Local Grant **Application Form Project Details** Which Community Board is your organisation applying to (see map Schedule A)? Bay of Islands-Whangaroa Kaikohe-Hokianga Te Hiku Clearly describe the project or event: Redevelopment Making a promotional video for Lindvart Park Finish Nov 2020 Date Name of Activity Time Location Lindvart Park, Kaikohe 1 No ☐ Yes Will there be a charge for the public to attend or participate in the project or event? If so, how much?

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.

Kaikohe and Districts Sportsville Incorporated wish to employ
someone at \$25 per hour for 50 hours (20 hours filming, 20
hours editing, 10 hours travel and meetings) to film a promotoral
video of the sports who would use our new Multi-Sport
complex, of the Sub-Committee working on the new Complex
of the other projects going into Lindvert Park, and of community
and involved people speaking to the project.
The propose of the video is both for community promotes and
Les Dionie nat le beschinds sources
The funding neoded is for the Multi-sport Complex and other
plojects highlighted in the Keserre Management Place Committee
projects are backer men harkone will be transformed
sporting and recreational opportunities which
Travel from all amura Northland to alle of T
trail arithmetrail playground will be
trail, sculpture trail, playground, walking tracks and eyeling ways

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Project Cost

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

- 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	30 hours @ \$25 \$1,250	\$625
Facilitator/Professional Fees ²	5	
Administration (incl. stationery/copying)		
Equipment Hire		BEARING THE
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)		
	\$1.250	\$625

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

115-987-518

How much money does your organisation currently have?

\$78.640-72

How much of this money is already committed to specific purposes?

\$78,640.72

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

Purpose	Amount
Building Projects in Redevelopment	\$ 24,868.76
Operational funding formonaging Lindart Park	
Including fencing and gating entire park to	
prevent motorbikes, maintenance and improvements.	
my soday, secrety ex	\$53,771,96
TOTAL	\$78.640.72

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

Funding Source	Amount	Approved
Reserve Management Fund	\$148,000	Yes / Pending
approved by Kaikoke-Hollianga Board		Yes / Pending
Still need to provide some things to draw		Yes / Pending
down. At least \$144,000 of this earmaked		Yes / Pending
for Feasibility Study consultants		Yes / Pending

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

Purpose	Amount	Date	Project Report
Operational Funding	\$42,530.91	11/2/19 12/3/20	Submitted Y / N Y / N due Y / N
www.fndc.govt.nz Memorial Ave, Kaikohe 04 A2686814 (version Sept 2018)	40 Private Bag 752, Kaikohe (Page 4	0440 funding@fndc.g	ovt.nz Phone 0800 920 02



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)

KAIKOHE AND DISTRICTS SPORTSVILLE INCORPORATED

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.
- We acknowledge and agree that the Far North District Council may disclose or obtain information related to the fund-2. ing of the organisation from any other government department or agenda, private person, or organisation.
- We have attached our organisation's most recent statement of income and expenditure, annual accounts, or other 3. financial documents that demonstrate its ability to manage a grant.
- Individuals associated with our organisation will not receive a salary or any other pecuniary gain from the proceeds of 4. any grant money arising from this application.
- 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

Signatory Two

Debbie Raphael

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Local Grant

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
 To spend the funding within 40.
- To spend the funding within 12 months of the date of grant approval unless written approval for an extension is obtained
 To spend the funding only for the funding only for
- To spend the funding only for the purpose(s) approved by Far North District Council unless written approval for a change
 To return to the For North District Provides a change
- 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.
- To acknowledge the receipt of Community Board funds as a separate entry in our accounts, or in a note to our accounts,
 To acknowledge any financial actions and the accounts of the
- 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.
- 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).
- 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 Name JUSTIN BLAIKIE Position CHAIRPERSON 273 Te Ahu Ahu Road, RD2 Kaikohe Postal Address Post Code 0472 027 542 2992 Phone Number Mobile Number 13/7/20 Signature Date Signatory Two DEBBIE RAPHAEL Position FACILITIES COORDINATOR Name 0472 KAIKOHE Post Code Postal Address 19 OROMAHOE SCHOOL ROAD, RDZ Mobile Number 021 0821 1637 Phone Number 10/7/20 Debbie Raphael Date Signature

Schedule of Supporting Documentation

Kaikohe & District Sportsville Incorporated

The following supporting documentation has been provided in support of the grant application and is emailed under separate cover.

1	Bank Account Snippy – as at 11 July 2020
2	Annual Report – Year ended 30 June 2019
3	Auditor's Report - PKF Poutsma Lemon (Kerikeri) Ltd
4	Group Photo