

P.O. Box 72, Kaitaia. 0441 - E: kbclub2015@gmail.com Mobile: 021 027 89896

18th November, 2019

The Secretary,
Funding Advisor,
Far North District Council,
Private Bag 752,
Kaikohe 0440

FAR NORTH DISTRICT COUNCIL 1 8 NOV 2019

KAITAIA SERVICE CENTRE

Dear Sir/ Madam,

Re: Te Hiku Community Board - Funding Application - Kaitaia

Please find funding application papers for an event planned for Saturday February 29th, 2020 at Te Ahu in Kaitaia. We have included local businesses for this fund application. This event is an exhibition darts match with local players and NZ ranked players. To provide the opportunity to fundraise for our community. This event also will give the local community a chance to see darts in a live setting. There is also local live entertainment.

This will be an afternoon event (1pm – 8pm) and we have planned it on the same footprint as last year's inaugural event –the committee has run events at Te Ahu for the past 6 years. Either in the name of Kaitaia Boxing Club Inc. or Kaitaia Sport and Leisure Trust.

We have had 1 successful application with Community Board in 2018. We are now slightly limited in Kaitaia now as we have only 2 pub gaming charities to source funds off, due to change of allegiance of one outlet in Kaitaia, the outlining areas are not designated to Kaitaia applications, even though they are under Far North District Council Licencing region.

I am happy to meet and discuss application at December Board meeting and look forward to a positive outcome for the Trust.

Regards

Shirley Williams, Administrator

Mob 021 027 89896



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 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
 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 o	details
Organisation	KAITAIA SPORT AND LEISURE TRUST Number of Members 4
Postal Address	POBOX 72, KAITAIA. 0441 Post Code 0441
Physical Address	Shape, 2 Bank St. Kartara Post Code 0410
Contact Person	Shivley Williams Position SECRETARY ADMINISTRATION
Phone Number	021 027 89896 Mobile Number 021 027 89896
Email Address	Kbclub2015egnail com/shideywilliomsextor.co.nz
Please briefly	describe the purpose of the organisation.
Our Trus	st holds an annual overtiebated to sports this year will

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be our 2nd Dart Invitational Exhibition In



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 Activity 2020 Kartara Davts Invited rotate 29 02 2020
Location Tephu-Karara Time Ipm-8pm
Will there be a charge for the public to attend or participate in the project or event? ☐ Yes ☐ No
If so, how much? We have 3 tier Dricing \$60, \$40 or \$30 Dax
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 event is held annually by Trust to avouide on event our Community in the Tettiku havol region does not see This event by your BNZ ranked players (sexts) to compete and show case their talents of in large cities. NZ Dart Players were impressed with type of Enaw chaped last year in Kentaig. This chowcase burnes a length such display of the sport we also work with local tarnorth Darts Freecation, local players are selected from local clubs.
The Staffing required forthis type of event(150) 15. Sourced from local Community groups ea. HTC, FIREBURGE, USO Club, local school students story on Karraia We engage as very local business for services we do have to engage at of aun for some Diofessional services. Also 1/2 Dart Plane is have a fan base and they alknow



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	1750.	1750
Advertising/Promotion 2	1360.	441
Facilitator/Professional Fees ²	16550	
Administration (incl. stationery/copying)	16472	
Equipment Hire 5	2470	900
Equipment Purchase (describe)		
6		
Utilities Value 7	500	
Hardware (e.g. cement, timber, nails, paint)		
Consumable materials (craft supplies, books)		
Refreshments water (Lig. Lig. Lig. Lig. Lig. Lig. Lig. Lig.	250	
Travel/Mileage	3700	
Volunteer Expenses Reimbursement 12		
Wages/Salary Zwarks 13	1200	not applicable
Volunteer Value (\$20/hr) 2 Neeks	3840	not applicable
Other (describe) Accommodation	20 -0	
Inight for 2 nights. 15	2800	
TOTALS	50892	3091

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



Application Form

Financial Information				
Is your organisation registered for GST?	☑ Yes	□ No	GST Number	119-873-908
How much money does your organisation c	urrently hav	re?	2	000.00.
How much of this money is already committed	? A	uninistration Cods		
				==:

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

Purpose	Amount
Bar LICENCE	201
Bar Licence Wiistbands	115
Stationery	200
Staff Meal	800
Advertising.	150
TOTAL	1472

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

Funding Source	Amount	Approved
Beginning December 2019		Yes / Pending
anuary 2000		Yes / Pending
(Zebruary 2000		Yes / Pending
		Yes / Pending
Oxford Sports Truct + Four	rwinds	Yes / Pending

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

Purpose	Amount	Date	Project Report Submitted
Accommodation	1640	07/04/2019	Y) IN Refund 4
Not granted		28/09/2017	(Y) / N
		1.	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)



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 funding 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 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.
- 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

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Signatory Two

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Signatory One



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.
- 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).
- 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 O	ne /
Name	Shirley Williams Position SECRETARY/ADMINISTRACT
Postal Address	418 Puckey Ave KATTATA Post Code 640
Phone Number	021 027 89896 Mobile Number 021 027 89896
Signature	Elyster Ullians Date 15/11/19
Signatory Tv	vo Company
Name	Brenden Marrissey Position Chairperson
Postal Address	8 Eden Terrace, Kaitaia Post Code 0410
Phone Number	09 4080255 Mobile Number 027 8900842
Signature	B. L. Momssey Date 15/11/19