

# Application for a community grant

NOTE: All fields in this application form are mandatory. Incomplete applications or applications that don't include all required supporting documents as set out in the checklist, will not be considered for funding.

### 1. Applicant details

Name of app	olicant/community group:		
Name of cor	ntact person:		
Email:			
	ess for correspondence:		
Postcode: _	Phone:		
2. Organis	sation details		
Briefly descr	ribe your organisation, the comm cil's applicant criteria.	nunity service that it provide	
Describe ho	w the public could access the se	rvices the grant funding w	•
Number of p	paid employees:	Number of volunteers:	
-	r organisation's primary source c government funding		
Is your orga	nisation a registered Incorporate	d Society?	
🗌 Yes	Incorporation Number:		🗌 No
ls your orga	nisation a registered Charity?		
🗌 Yes	Charities Registration Numbe	r:	🗌 No
Is your orga	nisation registered for GST?		
🗌 Yes	GST Registration Number:		🗌 No

35 Kenrick Street - PO Box 266 - Te Aroha 3342 - www.mpdc.govt.nz Morrinsville & Te Aroha 07 884 0060 - Matamata 07 881 9050 - Fax 07 884 8865 Please attach your Statement of Accounts and/or a Bank Statement less than three months old, and a Bank Deposit slip or other evidence of your organisation's bank account details.

#### 3. Project details

In which area will th	e project take place?	(Tick all that apply)
Matamata	Morrinsville	🗌 Te Aroha

Describe the project your organisation is requesting funding for and how it meets the policy eligibility criteria.

Describe how your organisation will contribute to this project, either financially or through volunteer time or other.

Describe how your project contributes to one or more of Council's Outcomes for the Community (Refer to the Community Ward Grant Policy for a full list of outcomes).

Describe how your project will benefit the community.

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Amount requeste	d:\$	(there is an	i application	limit of \$2,500)

For all funding requests over \$500, please attach at least two quotes for goods/services

### 4. Supporting information

Have you previously	been given	assistance by Co	uncil or other agencies for this or a
similar project?	🗌 Yes	🗌 No	
If yes, please supply	details, who	, when and what	type of assistance.

### 5. Declaration

I declare that I have the authority to make an application on behalf of my organisation and that the information supplied here is correct. I understand and agree that contact details, rating and all other information included with this application will be presented to Council in a public meeting and will be accessible by the public.

Name: \_\_\_\_\_

Signature:\_\_\_\_\_Date:\_\_\_\_\_

Please send your application and attachments to: Community Grants Applications Matamata-Piako District Council PO Box 266 Te Aroha 3342

Office Use Only				
NAR:	Register Updated Date	: /	1	
Register Number 650	RM#	£		

## Checklist

Use this checklist to ensure you have correctly completed your application and included all the required information - have you;

Filled out all the information requested on this form – attach additional sheets if not enough space and reference the section.

Checked in the Community Grants Policy that your organisation is eligible for funding

- ✓ Non-profit, non-commercial organisation?
- Not funded by other government agencies?
- Not currently funded by Council through other funding arrangements?

Checked that your project is eligible for funding under the Community Grants Policy?

- Project has not commenced at the time of applications being assessed (two weeks following the closing date).
- Project is not to contribute to operational costs such as rates, rent, insurance, power, telephone/internet, debt servicing, wages/salaries, and subscription fees

Attached all relevant supporting documentation:

Bank account details on your organisations letter head or pre-printed bank deposit slip.

Statement of Accounts (either your latest Accounts from your AGM or a recent Bank Statement showing your financial position).

If your organisation does not have its own bank account, any successful funding can only be uplifted by asking the supplier to invoice Council directly using the Purchase Order number provided by Council as Reference on their invoice.

Signed and dated your application.