Coast Initiatives Fund

Application Form

Funding for coast community initiatives

Pūtea mō ngā kaupapa hapori rohe

TO SUBMIT YOUR COAST INITIATIVES FUND APPLICATION PLEASE SEND BY POST, EMAIL OR ONLINE:

Coast Community Board
Coast Initiatives Fund Application
c/-Ōpōtiki District Council
PO Box 44
Opotiki 3162
email info@odc.govt.nz
apply online at odc.govt.nz/coastinitiatives
PH 07 3153030

PART 1: APPLICANT DETAILS

Name and contact details				
Full name of organisation:				
Contact person:				
Relationship to organisation:				
Street address/PO Box:				
Suburb:	Tow	n/City:		
Postcode:	Coul	ntry:	New Zealand	
Email:				
Telephone (day):				
All correspondence will be sent to the	above email or postal address			
Name on bank account:			GST number:	
Bank account number:				
If you are successful your grant will be	e deposited into this account once	a verifie	d deposit slip is inclu	ided in this application.
Would you like to speak in support of your application at the Coast Community Board meeting?				
Yes: No:				
Application requirements:				
1. Deliberations on grant money applications will be conducted by the Coast Community Board and must meet criteria approved by the Board, see part 3 Application Criteria.				
2. Applications must be received by the Ōpōtiki District Council <u>a minimum of 3 weeks</u> before the Coast Community Board meets, at which a grant decision is required.				
3. Applications must be received in a timely fashion to allow a grant decision to be made <u>prior</u> to the anticipated date of expenditure for which funding is requested.				
4. Grant applications will only be considered from organisations and not (an) individual(s).				
5. Applications will only be accepted from those organisations that are established within the Coast ward. If such an organisation proposes to provide assistance funding from a Coast Initiatives Fund grant then the reasons shall be outlined in the application.				
6. Grant money shall only be	paid on submission of an invoic	ce with	a verified bank ac	count deposit form

and GST number (if GST registered) details on the organisation's invoice.

PART 2: PROJECT DETAILS

Event/ Project name:							
Brief description of event/project:							
Event/Project location, timing	and numbers						
Venue and suburb or to vn:							
Date of event:		Date grant requested:					
Event/Project detail	S						
1. The idea/Te kaup	1. The idea/Te kaupapa: What do you want to do?						
2. The process/Te whakatutuki: How will the project happen?							
3. The people/Ngā tāngata: Tell us about the key people and/or the groups involved.							

4. Timeframe/Taima: Tell us what the expected timeframe for completion of your project?				
5. The budget/Ngā	pūtea			
Are you GST registere	d? Yes Do NOT include GST in your budget			
	No Include GST in your budget			
Project costs	Write down all the costs of your project and include details of items this covers.			
Item eg hall hire	Detail eg 3 days' hire at \$100 per day	Amount eg \$300		
		_		
		_		
Total Costs		\$		
Amount you are reques	\$			

Quotes to be attached: (Where applicable)		
Have you applied to any other organization for funding for the same purpose as this application?		
If yes, please provide details of funding organization, date applied, amount of request, purpose and outcome.		

If your application is approved it is part of the criteria that a written report along with photos will be submitted to the Community Funding Initiative committee within one month of the project being completed.

PART 3: APPLICATION CRITERIA

The Coast Community Board has adopted the following criteria in assessing funding for projects:

- 1. The types of project/event which will be considered for funding are;
 - Marae facility development and upgrades excluding projects, or components of projects, that can attract funding from other funding sources.
 - Community facilities and sports fields.
 - Pride and beautification projects within the community.
 - Community events.
 - Coastal access excluding private access.
 - Infrastructure projects specific to coastal communities that may be outside of Council's immediate priorities or that may add value to existing initiatives.
 - Education and training for organisations, or members of organisations, resulting in ongoing benefit or increased opportunities to the coast community.
- 2. In preparing to assess applications to the CIF the Community Board Members shall at all times give due consideration to:
 - The Model Standing Orders for meetings of the Opotiki District Council on the matter of pecuniary (i.e. financial) interest; and
 - The Opotiki District Council Code of Conduct in regard to conflicts of interest.

PART 4: DECLARATION

You must read and sign the following. Please place an X in each box to show that you have read the information and agree to each section.						
	e declare that the details contained in this application are correct and that I/we have authority to commit to the owing conditions.					
I/We agre	I/We agree to the application requirements stated in application details on page one.					
If this application is successful, I/we agree to:						
complete the project as outlined in this application (or request permission in writing from the Coast Community Board for any significant change to the project).						
utilise fur	nding within two years from the date of appro	val (failure v	will require applicant to reapply).			
return a project report within one months after the project is completed (failure may lead to further funding applications being declined).						
return an	y unspent funds.					
where ap	oplicable (e.g. where items are purchased) re	ceipts and/o	or written quotes shall be provided to Council.			
acknowle	edge Coast Initiative Funding at event openin	gs, present	ations or performances and provide photos.			
I understand that the Opotiki District Council is bound by the Local Government Official Information and Meetings Act 1987.						
	I/we understand that my/our name and brief details about the project may be released to the media or appear in					
I/we undertake that I/we have obtained the consent of all people involved to provide these details. I/we understand that I/we have the right to have access to this information. This consent is given in accordance with the Privacy Act 1993.						
THIS COIL	Sent is given in accordance with the r rivacy h	ACI 1995.				
Name						
	(Print name of contact person/applicant)		(Print name of parent/guardian for applicants under 16 years of age)			
Signed:		Signed:				
olgilea.		olgried.				
	(Applicant or organisation's contact person)		(Parent/guardians signature for applicants under 16 years of age)			
Date:		Date:				