



Oraka Aparima Community Board

Community Partnership Fund

Amount available for 2021/2022 financial year - \$12 136

Closing date 8 31 August



Criteria

- consideration will be given to all funding requests on a case-by-case basis. The board will give preference to applications that directly benefit the community board area and link to the community board plan outcomes
- there is no cap on the amount applicants can request
- co-funding is preferable, but not essential
- two quotes are preferable for capital works, but if it is not possible to get more than one quote and explanation why will be sufficient
- applicants may be invited to come to a board meeting and speak to their application
- groups do not have to be a legal entity to apply
- applications relating to improvements to council-owned facilities are not eligible for funding
- Does not encourage retrospective applications, but may consider them on case-by-case basis
- health and safety is the responsibility of the applicant and the community board does not hold liability
- please be aware that your application will part of public agenda

Vision

A vibrant, sustainable, connected community focused on the locals and welcoming to visitors.

Community outcomes

- Oraka Aparima is a strong and involved community
- Oraka Aparima value the environment and ensure that it is healthy and protected for the future
- our strong economy is supported by a broad range of services
- our infrastructure is efficient, cost effective to meet current and future need

Any queries to:

Kathryn Cowie Community Liaison Officer kathryn.cowie@southlanddc.govt.nz

Community Partnership Fund Application Form

PLEASE TICK WHICH COMM	UNITY PART	'NERSHIP F	JND YC	OU AR	E APPL	YING FO	OR:			A	
☐ Fiordland Community Board											
☐ Oreti Community Board											
☐ Oraka Aparima Community Board											
☐ Northern Community	□ Northern Community Board										
☐ Ardlussa Community Board											
☐ Waihopai Toetoe Community Board											
☐ Tuatapere Te Waewae Community Board											
☐ Wallace Takitimu Con	nmunity Bo	ard								O	
☐ Stewart Island/Rakiura	a Communi	ity Board									
YOUR DETAILS											
Name of organisation											
Postal address											
Street address											
CONTACT NAMES											
Please give the names of two people who can be contacted if further information is required. The first contact must be the person who filled out the form. Under the Privacy Act (1993) consent from these people must be given before their details are recorded here.											
Name				Pho	ne	(day)					
Email						(evening)					
Name				Pho	Phone (day)						
Email					(even	ing)					
BANK ACCOUNT NUMBER TO DIRECT CREDIT GRANT PAYMENT IF APPLICATION SUCCESSFUL:											
To help speed the process up in the event of your grant being approved, can you please provide verification of your bank account details. This can be a screen shot or banking slip and it must be attached to your application.											
PROJECT DETAILS											
How many members belong to your club/organisation?											
Please describe fully: (Continue on a separate sheet if necessary)											
For what purpose does your organisation seek a Community Partnership Fund subsidy?											

If your application relates to a facility – who uses the facility and how often?									
Does the facility have a long term development and maintenance plan? $\square Yes$ $\square No$									
How will your project benefit the organisation or community?									
Start date of your project			Finish date of your project						
FINANCIAL DETAILS									
Are you registered for GST?	□No	□Yes	GST number						
Applicants that are not GST-registered need to provide budget figures that include GST									
Applicants that are GST-registered need to provide budget figures that exclude GST.									
Successful applicants who are GST-registered will be required to submit a GST invoice, after being notified the result of the application and prior to the grant being paid out.									

	PLEASE ROUND ALI	L FIGURES TO THE NEARES	Г DOLLAR					
EXPENDITURE \$		INCOME	\$					
Project costs	GST inclusive or	Your contribution						
	GST exclusive							
		Fees/subs						
		Fundraising						
		Loan/mortgage						
		Cash savings						
		Other						
		Sub-total						
		Other grants and sponsorship applied for						
		Sponsorship						
		Grants (successful and proposed)	Amount requested	Result date				

		Sub-total						
Total cost of the project is		Total Income						
How much money are	you applying for?	\$		_				
Briefly describe any voluntary effort or donated materials provided for the project.								
Voluntary effort (eg nu	mber of hours)							
Donated materials (eg approximate \$ value)								
TT 1 .			• .5					
How do you envisage p	paying for the future open	rational costs of this pi	coject?					
DECLARATION (PLEASE)	PROVIDE TWO SIGNATURE							
DECLARATION (PLEASE PROVIDE TWO SIGNATURES) We consent to Southland District Council								
collecting the personal contact details provided on this form. The consent is given in accordance with								
the requirements of the Privacy Act 1994. We also confirm that the information provided is accurate and complete and that the organisation committee has agreed to this project/funding application.								
Name								
Position in organisation	1							
Signature		Da	te					
Name		'	,					
Position in organisation	1							
Signature		Da	te					
Please attach Check								
a current statement of income and expenditure								
a current bank statemen								
quotations, where relevant								
letters of support (if ap								
These items will complete your application								
PLEASE ENSURE THAT ALL QUESTIONS ARE ANSWERED IN FULL AND THAT RELEVANT DOCUMENTATION ACCOMPANIES THE APPLICATION FORM.								
NOW YOU CAN SUBMIT YOUR APPLICATION IN ONE OF THE FOLLOWING WAYS:								

Email to funding@southlanddc.govt.nz

Post to Southland District Council, PO Box 903, Invercargill 9840

Drop into your nearest SDC office