



Waihopai Toetoe Community Board

Community Partnership Fund

Amount available for 2021/2022 financial year - \$22 213





Closing dates 31 March 30 September

Criteria

- consideration will be given to all funding requests, however requests must be not for profit and demonstrate community benefit
- the board will give preference to applications that directly benefit the community board area and align to the community board plan outcomes
- applications for salaries and operating costs will not be considered
- there is no cap on the amount applicants can request
- co-funding is preferable, but not essential. This will be assessed on a case-by-case basis
- more than one quote is preferable, but if it is not possible to get more than one quote an explanation why will be sufficient
- applicants may be requested to speak to the board about their funding request
- applicants do not have to be a legal entity to apply
- the Board can grant money 'subject to the balance of the funding being secured'
- applications relating to improvements to council-owned facilities are not eligible for funding
- 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 united, engaged community where people are valued, our assets are nurtured and our heritage and environment is respected.

Community outcomes

- A thriving, healthy and safe community with access to quality facilities, amenities and services
- Our community is connected and engaged
- Our unique, natural environment is healthy and protected
- Our communities have the opportunity to celebrate their history and heritage

Any queries to:

Tina Harvey Community Liaison Officer Tina.harvey@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? | | | | | | | | | | | |
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| If your application relates to a facility – who uses the facility and how often? | | | | | | | | | |
|--|-----|------|-----------------------------|--|--|--|--|--|--|
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| | | | | | | | | | |
| Does the facility have a long term development and maintenance plan? $\square Yes$ $\square No$ | | | | | | | | | |
| How will your project benefit the organisation or community? | | | | | | | | | |
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| 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. | | | | | | | | | |
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| | 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 | | | | |
| | | | | | | | | |
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| | | 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) | | | | | | | |
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| Donated materials (eg approximate \$ value) | | | | | | | | |
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| TT 1 . | | | • .5 | | | | | |
| How do you envisage p | paying for the future open | rational costs of this pi | coject? | | | | | |
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| 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