

# Community Development Grant (small community projects and events)

## Form Preview

### Organisation Details

\* indicates a required field

#### Organisation

**Organisation Name \***

Organisation Name

**Organisation Location Address**

Address

  

**Organisation Postal Address**

Address

  

**Organisation Primary Phone Number \***

Must be a valid New Zealand phone number

**Organisation Primary Email \***

Must be an email address.

**Organisation Primary Bank Account \***

Account Name

Account Number

Must be a valid New Zealand bank account format.

**Bank account verification**

Attach a file:

(i.e. evidence of one of the following: Electronic bank deposit slip or snapshot of bank statement that shows the bank name and bank logo, and the organisation name and bank account number)

**Organisation NZ Charity Registration Number (enter CC plus your number)**

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The Charity Registration Number provided will be used to look up the following information. Click Lookup above to check that you have entered the Charity Registration Number correctly.

New Zealand Charities Register Information
Charity Registration Number
Organisation Name
Other Names
Status
Street Address
Postal Address
Telephone
Fax
Email
Website
Date Registered

Must be formatted correctly.

## Contact People

### First Contact Person \*

First Name

Last Name

### First Contact Person Position \*

### First Contact Person Mobile Phone Number \*

Must be a valid New Zealand phone number

### First Contact Email \*

Must be an email address.

### Second Contact Person Name \*

First Name

Last Name

### Second Contact Person Position \*

### Second Contact Person Mobile Phone Number \*

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### Second Contact Person Email \*

Must be an email address.

## Other organisation information

### Tell us the purpose of your organisation & your not-for-profit status \*

Word count:

Must be no more than 50 words.

This would be detailed in your Constitution

## Project or Event

\* indicates a required field

### Project or Event details

#### Project/Event name \*

#### Start Date \*

Must be a date.

#### End Date \*

Must be a date.

#### Short description of project/event, and planned activities. \*

Word count:

Must be no more than 120 words.

What are you out to do?

#### Why is the project/event needed? \*

Word count:

Must be no more than 120 words.

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**Describe who will benefit from the project, and what the benefits will be \***

Word count:

Must be no more than 120 words.

Describe the estimated number, gender, age and location/region of those participating in the project (150 words recommended)

**What are the primary areas of focus for this project/program? \***

No more than 5 choices may be selected.

You can select items from any area of the list - all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

**List any partners working with you for the project/event, and what their role is? \***

Word count:

Must be no more than 100 words.

## Budget

\* indicates a required field

Total budget for this project/event (including other funding). If you are GST Reg DO NOT include GST in your budget figures. If you are NOT GST Reg include GST in your budget figures.

Income	\$	Expenditure	\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$
	\$		\$

## Budget Totals

**Total Income Amount \***

\$

This number/amount is calculated.

**Total Expenditure Amount \***

\$

This number/amount is calculated.

**Income - Expenditure \***

\$

This number/amount is calculated.

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**What items are you seeking funding for from Napier City Council \***

They must appear on the budget list

**Total amount requested (GST Excl) \***

\$

Must be a dollar amount.  
What is the total financial support you are requesting in this application?

## GST registration and additional information

\* indicates a required field

**Is your organisation GST registered? \***

- Yes  
 No

GST number

**Your GST registration number**

Additional information uploads

**Latest financial statement \***

Attach a file:

**Quotes \***

Attach a file:

**Any other information to support your application (i.e. evidence of the project such as flyers, advertising, feedback form previous events)**

Attach a file:

## Declaration and Terms and Conditions

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\* indicates a required field

### Declaration statement

#### By submitting this application:

I/We declare that the information provided in this application is true and correct to the best of my knowledge, and I have the authority to commit our organisation to this application.

If the application is successful, I/we agree to:

1. Complete and return an accountability report **no longer than one month after the completion of the project.**
2. Fully cooperate in any funding audit or inspection of your organisation if directed by Napier City Council, or an appointed contractor.
3. Provide your Child Protection Policy if requested.
4. Use any funding received for the approved purpose.
5. Your name and brief details about the approved funding being released to the media or appearing in public material as required.
6. Acknowledge the assistance of Napier City Council and use the Napier City Council logo in all publicity/communications.
7. Consent to, Napier City Council recording the personal contact details provided in this application, retaining and using these details, as required under the Local Government Official Information and Meetings Act 1987.

I understand that our organisation has the right to have access to the information in this application.

This consent is given in accordance with the Privacy Act 2020.

#### Napier City Council Terms and Conditions \*

Yes I agree to the above Terms and Conditions

#### Signature of Applicant Contact \*

First Name

Last Name

#### Position of Applicant Contact \*