

Community Initiatives Fund - August 2026 Application Form

Form Preview

Organisation Details

* indicates a required field

Organisation Name *

Organisation Name

Applicant Name *

First Name

Last Name

Applicant Position *

Organisation Address *

Address

Address Line 1, Suburb, Town/City, and Postcode are required.

Organisation Primary Phone Number *

Organisation Primary Email *

Must be an email address.

Organisation Website

Must be a URL.

Organisation Bank Account *

Account Name

Account Number

Must be a valid New Zealand bank account format.
(2 digits - 4 digits - 7 digits - 2 or 3 digits)

Bank Account Verification *

Attach a file:

Community Initiatives Fund - August 2026 Application Form

Form Preview

(i.e. evidence of one of the following - bank deposit slip or snap shot of bank statement showing bank name, bank logo, organisation name and bank account number)

First Year of Operation *

Applicant NZ Charity Registration Number...if applicable (CC in capital letters followed by number)

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.

If you are an Incorporated Society, please attach a copy of your re-registration confirmation

Attach a file:

Service Overview

* indicates a required field

1. What is the purpose of your organisation? *

This could also include your Mission Statement, Values Statement etc.

Community Initiatives Fund - August 2026 Application Form

Form Preview

Which of these priorities is your initiative meeting? *

- ☐ Demonstrates that there is a clear need in the community for the proposed initiative
- ☐ Demonstrates the result of the proposed initiative will have a transformational impact in the community
- ☐ Encourages collaboration between organisations to deliver positive community outcomes
- ☐ Builds capability and capacity within community organisations to be better able to deliver their initiative to the community

You may choose more than one option

2. What specifically do you want the funding for? *

3. What is the community demand for your initiative and who do you target/support? *

Provide numbers of people targeted/supported here in Napier

4. What are the expected outcomes of the initiative you are seeking funding for and how will you know if these have been achieved? *

Who are you collaborating with in the delivery of this initiative and has consideration been given to completing a combined funding application? *

Additional Information

* indicates a required field

What are the primary areas of focus for your initiative? *

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. safety,

Community Initiatives Fund - August 2026 Application Form

Form Preview

health, family violence, children and families, family violence, disabilities, social wellbeing, search and rescue), rather than the types of people it will affect (e.g. young people, refugees)

Who are the expected primary beneficiaries of your initiative? *

No more than 5 choices may be selected.

Please choose only the group/s that are at the very core of this project/program. If your initiative is open to everyone, choose the first item, 'Universal - no particularly targeted beneficiaries'

GST registration & Financial Information

* indicates a required field

Is your organisation GST registered? *

- ☐ Yes
☐ No

GST number

Your GST registration number

Latest Annual Financial Accounts

Latest Annual Financial Accounts *

Attach a file:

Please attach your latest financial accounts

Financial Information

* indicates a required field

Expenditure and Items Requested for 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.

Expenditure e.g. as below	Costs per Annum	Funding Request Br eakdown	Amount of Funding Requested.
Add other lines as required for your application i.e. venue hire, equipment hire etc			
Salaries & wages	\$		\$
Professional fees	\$		\$

Community Initiatives Fund - August 2026 Application Form

Form Preview

Volunteer expenses incl training	\$		\$
Administration & office expenses	\$		\$
Office rent, rates, lease expenses	\$		\$
Office maintenance	\$		\$
Insurance	\$		\$
Utilities	\$		\$
Vehicle expenses	\$		\$
Marketing & advertising expenses	\$		\$
Website expenses	\$		\$
Stationery & printing expenses	\$		\$
Programme/Project expenses e.g. resources, hireage, fees	\$		\$
Accounting & audit fees	\$		\$
Event expenses e.g. venue, sound system, equipment etc	\$		\$
	\$		\$

Expenditure Totals

Total Expenditure Amount

\$

This number/amount is calculated.

Total Amount Requested

\$

This number/amount is calculated.

What is the total financial support you are requesting in this application?

Additional Information

What other funding does your organisation receive for your initiative? *

Detail funding received i.e grants, donations, government funding etc

Other documents to support your application

Attach a file:

Community Initiatives Fund - August 2026 Application Form

Form Preview

Other documents to support your application

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Declaration and Terms and Conditions

* 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 ***within 12 months of when the funding was allocated.***
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 publicity/communications where applicable.

Community Initiatives Fund - August 2026 Application Form

Form Preview

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 *