

Egmont Plains Local Discretionary Fund Criteria

The purpose of the Local Discretionary Fund is to fund small projects within the ward that encourage groups with non-profit making or charitable aims to develop services, facilities, amenities or programmes for: recreation and sport; entertainment and amusement; culture and arts; and the general benefit of the community.

This fund should generally be treated as a **LAST** resort after all other attempts to raise funds or obtain assistance have been unsuccessful.

The following are ineligible for funding:

- Travel costs
 - Individuals
 - Gifts
 - Conference attendance; and
 - Food or catering costs.
- The Board will not normally provide retrospective funding.
 - Successful applicants are required to provide a written report upon completion of their project.

You will not normally be eligible for funding if you have already received funding from the Egmont Plains Discretionary Fund this financial year (1 July – 30 June).

Attachment Details

You **MUST** attach the following information:

- A full set of accounts/financial statements and a copy of your most recent bank statement.
- Evidence you have applied to other funding sources and the results.

Please make sure you have attached the following information:

- Quotes for your project costs.
- A bank deposit slip with group's bank account details.
- Copy of meeting minutes confirming group's approval to apply to this fund.

IF YOU ARE UNABLE TO PROVIDE ANY OF THE ABOVE, PLEASE GIVE AN EXPLANATION BELOW

(please use a separate sheet if needed)

Section 1 - Applicant Details

Name of group/organisation:			
Email Address:			
<i>(Note: all correspondence relating to your application will be sent to this email address in the first instance)</i>			
Postal Address:			
Postcode:		Telephone (day):	
Project		Amount Requested	

What is the legal status of your group?

Trust

Incorporated Society

Informal Community Committee

Other – Please State: _____

Are you GST Registered: Yes GST Num: _____ No

How many members does your group currently have? _____

Contact Details: (Please provide two contacts for your group)

Name: _____
Position: _____
Address: _____ _____
Phone: _____
Email: _____

Name: _____
Position: _____
Address: _____ _____
Phone: _____
Email: _____

What is the purpose of your group?

How is your group normally funded?

Section 2 – Project Details

Provide a brief project description:

Project start date: _____ **Project end date:** _____

Who will benefit from your project and how?

Is consultation required with Māori/local Iwi for your project? Yes

No

If so, how have you undertaken consultation and what feedback was provided?

Section 3 – Financial Details

Project cost details: Applicants who are GST-registered need to provide budget figures that exclude GST. If you are not GST-registered your budget figures need to include GST

Item	Cost
	\$
	\$
	\$
	\$
	\$
Total Project Cost	\$

Project income details: e.g. project income and other sources of income eg. other grants (*including applications to other community boards*), donations, discounts on services, own contribution, existing funds, expected fundraising.

Income Source	Confirmed (Yes/No/Awaiting Outcome)	Amount
		\$
		\$
		\$
		\$
		\$
		\$
Total Funds Available		\$

Funding summary:

Total Project Cost	\$
Less/minus Total Funds Available	\$
Difference/shortfall	\$
Amount requested from Discretionary Fund	\$

Section 4 – Declaration

- We declare that we are a not-for-profit group.
(A not for profit group does not earn profits for its members. All of the money raised or donated is used in pursuing the group's objectives.)
- The information supplied in this application is correct.
- We certify that any funding received through the Egmont Plains Community Board Discretionary Fund will be used solely for the project or purposes disclosed in our application.
- If this application is successful, we agree to provide any report, receipts or invoices which may be requested and to promote or acknowledge the support of the Community Board at every opportunity.

Please provide two members signatures

Name: _____

Name: _____

Signature: _____

Signature: _____

Position in group: _____

Position in group: _____

Date: _____

Date: _____

Applications close on the following 2019 dates:

Thursday 3 January	Monday 6 May
Monday 11 February	Monday 17 June
Monday 25 March	Monday 29 July
Monday 21 October	

Post: Executive Assistant Community & Infrastructure Services
South Taranaki District Council
Private Bag 902
Hāwera 4640

Email: funding@STDC.govt.nz

INCOMPLETE APPLICATIONS WILL BE RETURNED TO APPLICANT FOR COMPLETION

(please be aware this could delay the consideration/outcome of your application).

LATE APPLICATIONS WILL NOT BE CONSIDERED