

Community Development Application Form

Form Preview

Welcome / He mihi

Before completing this form

Please ensure that your organisation has a formal legal structure and is not-for-profit.

This fund supports projects such as:

- Ongoing community services (e.g., operating)
- Rural community hall (e.g., heaters)
- Heritage protection project (Please provide confirmation letters or meeting minutes)

When your application is submitted you will receive an automatic confirmation email that the application has been received from SmartyGrants.

If you do not receive an email confirmation, please check to see if the email has been treated as junk.

Contact Details

* indicates a required field

Applicant Details

Applicant *

Organisation Name

This must match the bank account provided

Contact Person

Applicant Primary Address

Address

Applicant Email *

Must be an email address.

Applicant Primary Website

Must be a URL.

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Applicant Postal Address

Address

Applicant Mobile Phone Number

Application Contact Email

Must be an email address.

Interview Requested

- ☐ Yes
☐ No

Organisation Details

* indicates a required field

What is your organisation's purpose or mission?

Word count:

Must be no more than 200 words.

Does your organisation have a New Zealand Business Number (NZBN) or Charity Registration Number (CRN)? *

- ☐ Yes ☐ No

Applicant NZBN

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

New Zealand Companies Register Information
NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address

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Applicant CRN

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.

What is your organisation's legal structure? *

- ☐ Incorporated Society
- ☐ Charitable Trust
- ☐ Limited Liability Company
- ☐ Not for profit community group
- ☐ Marae/Hapū/Iwi/Māori

If your organisation is unincorporated it must have an auspice organisation. An auspice organisation is an entity that provides support and guidance to another organisation or individual seeking funding or support for a project.

Project Details

* indicates a required field

Project title *

Provide a name for your project/program/initiative. Your title should be short but descriptive

Anticipated start date *

If unknown, provide your best guess

Anticipated end date *

If unknown, provide your best guess

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Please provide a short summary of your initiative *

Word count:

Must be no more than 200 words.

What are you out to do, including the purpose, estimated participants, activity details, and beneficiaries.

Rationale: What is the need and how will you address it? *

Word count:

Must be no more than 200 words.

How was the community involved in identifying the need? i.e. who have you spoken to? What evidence or insights do you have? What barriers are you trying to overcome?

Please upload letters of support (if available/relevant)

Attach a file:

A maximum of 3 files may be attached.

How will your initiative benefit the community? *

Expected Outcomes

What are the expected outcomes of the project? *

Word count:

Must be no more than 200 words.

Describe three things you want the project to achieve in terms of benefits for participants and/or others.

Project Budget

* indicates a required field

Total Amount Requested

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

Total Project/Program Cost

What is the total budgeted cost (dollars) of your project?

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Budget (GST exclusive)

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have applied for, whether it has been confirmed or not.

All amounts should be **GST exclusive**.

Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'.

Examples of expenses could include 'onsite power & water for 6 months', 'office supplies', 'part-time staffer x 40 hours'.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT).

Income Description	Income Type	Confirmed Funding?	Income Amount (\$)	Notes
			\$	
			\$	
			\$	

Expenditure Description	Expenditure Type	Expenditure Amount (\$)	Notes
		\$	
		\$	
		\$	

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.

Please attach relevant quotes for those expenditure (cost). *

Attach a file:

PDF only

Bank Account *

Account Name

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Account Number

Must be a valid New Zealand bank account format.

Bank account verification *

Attach a file:

This can be a bank statement or screenshot showing the account number and name. Please note, the bank account name must match the applicant's name.

Applicant Capacity

* indicates a required field

Do you have any previous experience in planning projects of this nature *

Word count:

Must be no more than 150 words.

This could be your strategies, promotions, outcomes, and partners.

Have you received a grant from the Timaru District Council in the past 3 years? *

☐ YES

☐ NO

Please tell us about other grants you have received through the Timaru District Council in the past three years *

Please describe date, project title, and amount applied.

Please provide a link to or attach a copy of your most recent Annual Report.

If you do not produce an annual report, please provide us with your most recent financial statements (may include a Profit and Loss Statement / Statement of Financial Performance and a Balance Sheet / Statement of Financial Position).

Upload files

Attach a file:

or

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Provide web link:

Must be a URL

Acknowledgement & Promotion

* indicates a required field

Fund recognition *

Word count:

Must be no more than 100 words.

How will you recognise the contribution from the fund in your project, within your organisation, or with your community. This is a requirement of successful applicants and you may be required to provide evidence.

Timaru District Council regularly posts news and information on its social media channels and the panūi newsfeed section of the website. If you are interested your project/event being showcased on these platforms, please provide details below. *

Word count:

Must be no more than 100 words.

The council posts about the projects and organisations they fund on their website and on their social media pages

Declaration and Privacy

* indicates a required field

Declaration: Conflict of interest

A conflict of interest could arise where you (the applicant) have a responsibility as a result of receiving Council grant monies. This could affect another responsibility, duty or relationship you may also have.

For example:

- Personal or family relationships that you have
 - with Council employees
 - with Council contractors
 - organisations or persons that you will procure services from with the grant monies
 - Financial relationships (eg investments that you have in entities that you will procure services from with the grant monies)

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- Employment relationships or membership of clubs (eg you intend to procure services with the grant monies from your employer or a club you are a member of - who will benefit financially from the arrangement.)

Do you have a conflict of interest? Please detail below. *

Word count:

Must be no more than 100 words.

*

- ☐ I/We understand that Timaru District Council is bound by the Local Government Official Information and Meetings Act 1987
- ☐ I/We understand that my/our name and brief details about the project may be released to the media or appear in publicity material
- ☐ I/We understand that I/we have the right to have access to this information
- ☐ I/We undertake that I/we have obtained the consent of all people involved to provide these details
- ☐ I/We understand that applicants may be invited to attend a meeting to present further information and / or clarify the application
- ☐ I/We understand that all successful applicants must complete an acquittal report based on a council provided template within two months of the completion of the project. If further funds are sought before the completion of the project, a project update and detail on funds spent to date will be required
- ☐ I/We understand that any unspent funds must be returned to council
- ☐ I/We understand that fund recognition must be completed and that evidence of such may be requested

Declaration

This section must be completed by an appropriately authorised person on behalf of the applicant organisation.

I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.

I agree *

☐ Yes

☐ No

Name of authorised person *

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

Position *

Position held in applicant organisation (e.g. CEO, Treasurer)

Date *

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Must be a date

Privacy

Timaru District Council collects information to process your application, facilitate accountability reporting, and conduct meetings with funding bodies to determine the outcome of your application in line with our current [Community Funding Policy](#) and [Privacy Policy](#)

Privacy *

☐ I declare that I have read the privacy information and I am comfortable to proceed with the application