Multi-Year Grants
Form Preview

Eligibility

* indicates a required field

Multi-Year Grants

This field is read only.

Applicants: please note

Before completing this application form, you should have read the program guidelines below:

1. Multi-year grants are awarded every three years and are valid for a three-year period. These grants are available to non-profit organisations and charitable trusts that operate and provide a service to the general public of the Whakatane District rateable area.
2. Priority will be given to groups within the Whakatane District rateable area with a high volunteer base, and groups that provide a community service for the residents of the Whakatāne District.
3. No retrospective funding applications will be considered for any items or activities that have already started.
4. All applications must be on the prescribed Smarty Grants form. Support is available for applicants needing assistance to complete the form. Please contact grants@whakatane.govt.nz to organise this support.
5. Partially completed applications will not be considered.
6. Organisations applying for a multi-year grant will be eligible for a three-year period, for assistance with ongoing expenses. Successful organisations will not be eligible for a further multi-year grant for a period of three years after the conclusion of that initial three years except at Council's discretion or in exceptional circumstances on application. For example, if an organisation is successful in 2024, their grant will take them through to 2027.
7. The applicant organisation must be able to show how it will achieve more sustainable funding options in their application for a multi-year grant.
8. Organisations that have a head office outside of Whakatāne, but that serve the district, may be considered at the discretion of the Community Funding Committee. Those organisations must be able to show how they contribute to the Whakatāne District and give evidence of community activities.
9. Please refer to the Whakatane District Council Community Grants and Funding Policy (adopted 2023) Community Grants and Funding Policy

Examples of applications that will be considered for funding include applications for:

- Insurance costs
- Travel/fuel for specific activity
- Training or conference attendance
- Workshop development
- Overhead costs
- Building lease costs
- Security service

- Purchase of books in braille
- Stationery or the purchase of a laptop
- Promotion activities.

1. All successful applicants are required to complete a Project Accountability form, at the conclusion of each year within the three-year period and an overview of sustainable funding provided at the end of that three-year successful grant period.

Incomplete applications and/or applications received after the closing date will not be considered.

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It is important that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

If you have any questions in regards to these eligibility criteria, please contact t**he Community Funding Advisor on 07 306 0500 or email: grants@whakatane.govt.nz .**

If you do contact us throughout the application process, please quote the application number below.

Application Number

This field is read only.

Confirmation of Eligibility

Before proceeding, please confirm the following:

- you have **read and understood** the programme guidelines
- you are **able to demonstrate alignment** between your project and the aims of this programme
- your organisation is a n**ot-for-profit organisation or a charitable trust**
- your organisation is **incorporated, or is auspiced by an incorporated organisation** for the purposes of this application
- your organisation supplies services to the **community within the Whakatāne District Council rateable area**
- your organisation is able to demonstrate **financial viability**
- **your organisation does not owe any reports or money** to the Whakatāne District Council as a result of previous funding or grants
- your organisation's **primary purpose is not that of profit generation** and your organisation does not promote religious ministry, or political purposes, or activities where the main purpose is to promote religious, ethical, commercial, or political views of an organisation

You must confirm that all statements above are true and correct. *
☐ Yes

Contact Details

* indicates a required field

Privacy Notice

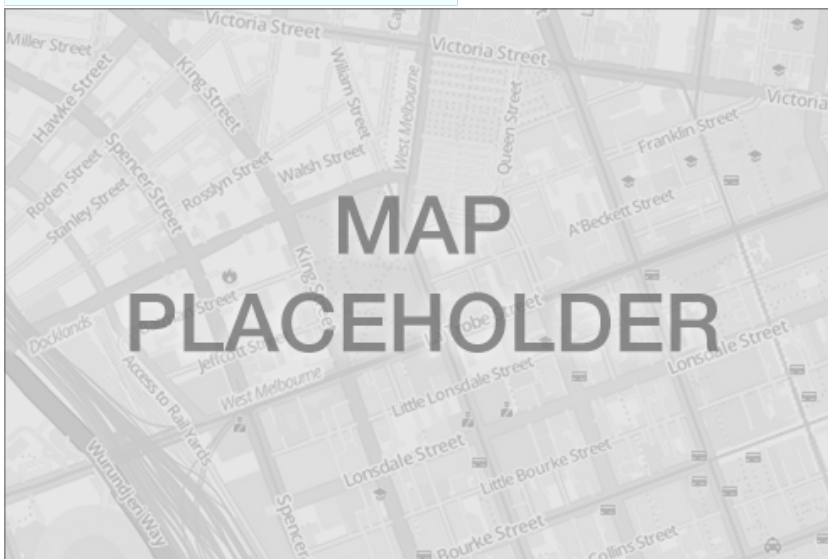To view our privacy statement, go to https://www.whakatane.govt.nz/website-privacy-policy

Contact Details

Name of Organisation *
Organisation Name

Make sure you provide the same name that is listed in official documentation.

Organisation Physical Address
Address

Organisation Postal Address
Address

If this is the same as the physical address, please enter "same as above"

Organisation Phone Number *

Organisation Email Address *

Must be an email address.

Organisation Website

Must be a URL.

Key Person Contact Details

Primary contact *

First Name   Last Name

This is the KEY person we will correspond with about this grant.

Position held in organisation *

e.g., Manager, Director, Coordinator, Volunteer

Primary contact phone number *

Must be a New Zealand phone number

Primary contact alternative phone number (if applicable)

Must be a New Zealand phone number

Primary contact email address *

This is the address we will use to correspond with you about this grant.

Primary contact postal address

Secondary contact (if applicable)

First Name   Last Name

Position held in organisation

e.g., Manager, Director, Coordinator, Volunteer

Secondary contact phone number

Must be a New Zealand phone number.

Secondary contact email address

Must be an email address.

Secondary contact postal address

About your organisation

* indicates a required field

What area does your organisation focus on? *

e.g., sport, rangatahi, arts, culture, tamariki, diversity, inclusion, safety

What year did your organisation start? *

What is your organisation's legal structure? *
- ◯ Unincorporated association
- ◯ Incorporated association
- ◯ Cooperative
- ◯ Company limited by guarantee
- ◯ Organisation established through specific legislation
- ◯ Trust
- ◯ Unknown

If your organisation is unincorporated. it must have an auspice organisation

What type of not-for-profit organisation are you? *
- ◯ Educational institution (includes pre-schools, schools, universities & higher education providers)
- ◯ Religious or faith-based institution
- ◯ Philanthropic organisation
- ◯ Peak body
- ◯ Social enterprise
- ◯ International NGO
- ◯ Professional association
- ◯ Healthcare not-for-profit
- ◯ Community group
- ◯ Political party / lobby group
- ◯ Research body
- ◯ General not-for-profit (i.e. none of the sub-types listed above)

Please choose the option that best applies to your organisation.

What is your organisation's main objectives and activities? *

Word count:

Must be no more than 150 words.
Please supply as much detail as possible.

How many paid staff are in your organisation? *

Must be a number.

How many volunteer staff are in your organisation? *

Must be a number.

How many people does your organisation work with in a typical week? (i.e. the total number including clients, members, participants) *

Must be a number.

Is your group GST registered? *
○ Yes
○ No

Please record your GST number here

Organisation Bank Details

Bank Account *
Account Name

Account Number

Must be a valid New Zealand bank account format.

Please upload a bank generated deposit slip or a bank statement header that proves this bank account *
Attach a file:

Auspice Information

* indicates a required field

Is your organisation auspiced by another organisation for the purpose of this grant? *
○ Yes   ○ No

Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.
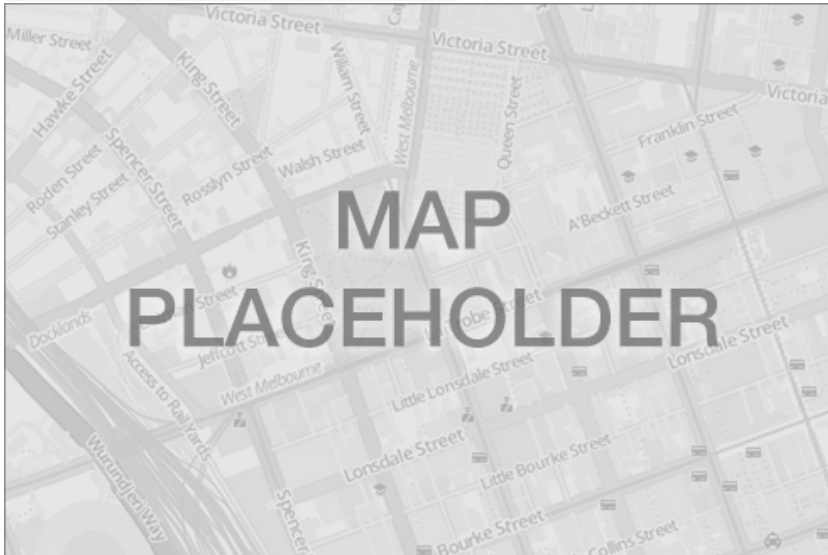
Auspice Organisation Details

Auspice organisation name *
Organisation Name

An auspice organisation is one that assists individuals or new trusts/organisations to manage funding they may not be able to access until fully registered.

Auspice physical address
Address

Auspice postal address
Address

If this is the same as the physical address, please enter "same as above"

Auspice phone number *

Auspice email address *

Must be an email address.

Auspice website

Must be a URL.

Primary contact person at auspice organisation *

First Name

Last Name

We may contact this person to verify that the auspice arrangement is valid and current.

Position held in organisation *

e.g., Manager, Board Member or Fundraising Coordinator.

Auspice primary contact email address *

Must be an email address

Auspice primary contact phone number *

Please record Auspice organisation GST number here *

Please attach a letter from the auspice organisation confirming that the auspice arrangement is valid and current. *

Attach a file:

The letter must be signed by an authorised person (e.g., Manager, CEO or Board Chair) and must include: name, position, signature and date.

About Your Funding Request

* indicates a required field

Project Title

Project Title *

Word count:
Must be no more than 10 words.
Provide a name for your project/service/proposal for which you are seeking funding.

How long will your project run? *

Project Timing

Project start & end date:

Anticipated start date *

The start date must be after the date of this application.

Anticipated end date *

The end date must be within one year and prior to 4 November 2025.

Project, Service or Proposal Description

Give a brief description of the project, service or proposal for which you are seeking funding *

Word count:
Must be no more than 250 words.
If you have a separate project plan or require more space, please list the key details above and upload a copy of the plan below.

Upload a project plan here (if applicable)
Attach a file:

Primary areas of focus

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)

Who are the primary beneficiaries of this project/program?

No more than 5 choices may be selected.
Please choose only the group/s that are at the very core of this project/program

Outcomes and Outputs of your Project, Service or Proposal

* indicates a required field

How will you know if your project, service or proposal is successful, and what are the benefits to the community? *

Word count:
Try to be brief but clear on the benefits.

Which of the five Strategic Priorities of the Whakatāne District Council does your project, service or proposal support? *
☐ Enhancing the safety, wellbeing and vibrancy of communities - Me mātua whakanui i te marutau, te oranga, me te wana o ngā hapori
☐ Strengthening relationships with iwi, hapū and whānau - Me mātua whakawhanake i ngā kōtuituinga ā-iwi, ā-hapū, ā-whānau anō hoki
☐ Building climate change and natural hazard resilience, including our infrastructure - Me mātua whakakaha i te aumangea ki te huringa āhuarangi me ngā matepā taiao tae ana ki te hangaroto
☐ Facilitating economic regeneration and responding to development pressures - Me mātua whakahaere i te tipuranga o te taiōhanga me ngā tonotono whare
☐ Shaping a green district - Kia toitū te rohe
☐ Other:

[ ]

☐
Tick as many as applicable

What will happen to the project, service or proposal if this funding application is unsuccessful, or if only a portion of the funds are received? *
○ The project will proceed as outlined
○ The project will be downgraded
○ The project will be prevented from being carried out
○ The project will be delayed. (Please specify expected length of delay in question below)

If the project will be delayed, please specify the length of delay

[ ]

Please note that the project must be completed within 12 months of receiving funding

If you have selected Other, please provide details.

[ ]

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?

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.**

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns, Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'. Examples of expenses could include 'onsite power and water for 6 months', 'office supplies', 'part-time staffer x 40 hours'.

Use the 'Notes' column for any additional information you think we should be aware of.

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT). Please **do not add commas** to figures – e.g. type $1000 not $1,000 – this will ensure your figures for each table total correctly.

Income Description	Income Type	Confirmed Funding?	Income Amount	Notes
			$	

Expenditure Description	Expenditure Type	Expenditure Amount	Notes
		$	
			Quotes required must be attached in Section 5 below.

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 quotes for all expenditure items o *
Attach a file:

Financial Details of Your Organisation

* indicates a required field

Organisational income

Please list GST as a separate item in your budget.

What was your organisation's total income (money received) for the complete last financial year? *

What is your organisation's total income (money received) in this financial year (to date of application)? *

Must be a dollar amount.

Must be a dollar amount.

Organisational expenditure

What was your organisation's total expenditure (money spent) for the complete last financial year? *

Must be a dollar amount.

What is your organisation's total expenditure (money spent) in this financial year (to date of application)? *

Must be a dollar amount.

Please upload a copy of your latest accounts (audited OR unaudited) OR balance sheet OR if you are a new group, a statement of estimated income and expenditure for your first year. *

Attach a file:

What is the current total of your bank balances (including savings and investments)? *

Must be a dollar amount.

How much (if any) of this total is tagged or committed to other purposes?

Tagged or committed means a sum of money that has been set aside from your day-to-day operating funds, for a specific project or purpose (e.g. building project, forthcoming event)

Amount tagged $	Purpose

Other Funding Assistance

What funding assistance has your group/organisation received from the Whakatāne District Council and other funding bodies over the past 3 years?

Year	Amount Received $	Purpose

Project Completion / Acquittal Forms

Have all project completion reports or acquittal forms for the funding outlined above, been completed and submitted? If not, please supply details.

Certification and Feedback

* indicates a required field

Certification

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (**may be different to the contact person listed earlier in this application form**).

- I/We the undersigned undertake to guarantee the grant will be used for the purposes our funding application stated.
- I/We undertake to provide a success report (Project Completion Report) of the project, sharing photos and videos, any news, or social media articles – good news stories which may be used for promotional purposes.
- I/We undertake to itemise how the grant funding was spent and to provide any receipts or relevant documents for that expenditure.
- I/We undertake to return any funds not spent within one month of the completion of our event/activity.
- I/We will ensure that the funded activity remains compliant with all relevant legislation, regulations and terms and conditions, including health and safety legislation.
- I/We the undersigned do solemnly and sincerely declare and acknowledge that: the details we have given in all sections of this application are true and correct to the best of our knowledge.
- I/We have the authority to commit our group to this application.
- I/We acknowledge all information contained in this application is subject to the Local Government Official Information and Meetings Act 1987, and the Local Government Official Information and Meetings Amendment Act 2023 and will be included in a publicly available agenda.
- I/We undertake to act in accordance with the Privacy Act 2020 and any other legal requirements as may be determined by the fund providers.
- The Council may collect from third parties any information it deems necessary about the applicant or the application.

I agree *   ☐   Yes

Name of authorised person *

First Name   Last Name

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

Position *

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

Contact phone number *

We may contact you to verify that this application is authorised by the applicant organisation

Contact Email *

Must be an email address.

Date *

Must be a date

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process:

○ Very easy   ○ Easy   ○ Neutral   ○ Difficult   ○ Very difficult

How many minutes in total did it take you to complete this application? *

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.