

Community Funding Application Form

Community Grants

Donations

Sponsorships

Loans

Industry Support

Conferences and Events

Special Projects and Research

Major District Initiatives

1. APPLICATION FORM

BEFORE COMPLETING THIS FORM, PLEASE ENSURE YOU HAVE READ THE COMMUNITY FUNDING APPLICATION PROCESS AND GUIDELINE INFORMATION PROVIDED TO ASSIST YOU IN ASCERTAINING WHETHER YOUR PROJECT IS ELIGIBLE FOR FINANCIAL SUPPORT.

Full Name of Organisation:			
Organisation's Structure	Incorporated Society <input type="checkbox"/>	<i>Certificate of Incorporation attached</i> <input type="checkbox"/>	
	Charitable Trust <input type="checkbox"/>	<i>IRD Letter of Confirmation of Income Tax Exempt status attached</i> <input type="checkbox"/>	
	Other – Please Specify <input type="checkbox"/>		
Nature of the Organisation	Please describe why your organisation was set up and what its main activities are.		
Internal Financial Controls	Please describe how your organisation approves, manages and controls its budgets and expenditure.		
Are you GST Registered	Yes <input type="checkbox"/>	No <input type="checkbox"/>	GST No <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/>
Bank Account Number	<input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> <input type="text" value=""/> - <input type="text" value=""/> <input type="text" value=""/>		<i>Bank Deposit Slip Attached</i> <input type="checkbox"/>
Postal Address			
Physical Address			
Phone		Fax	
Email			
Organisation's Statistics	Number of Full Time Equivalent Employees (FTE's)	<input type="text"/>	
	Number of Volunteers	<input type="text"/>	
	Number of Members/Clients	<input type="text"/>	
	How long has your organisation been in operation	<input type="text"/>	Years

Key Contacts (1)	Name		
	Position in Organisation		
	Phone (day)		
	Fax		
	Email		
Key Contacts (2)	Name		
	Position in Organisation		
	Phone (day)		
	Fax		
	Email		
Professional Service Contacts	Name	Address	Telephone
	<i>Bank</i>		
	<i>Accountant</i>		
	<i>Auditor</i>		
	<i>Insurer</i>		
	<i>Solicitor</i>		
	<i>Other</i>		
Assistance Requested	Please describe in detail the nature of the assistance required from Development West Coast (please use an additional sheet if required).		
Project Impacts	Tick the boxes to describe the outcome to which this project will contribute:		
	Promote sustainable regional economic growth		<input type="checkbox"/>
	Promote sustainable regional employment opportunities.....		<input type="checkbox"/>
	Ensure the West Coast becomes a learning centre		<input type="checkbox"/>
	Facilitate social and community support.....		<input type="checkbox"/>
	Build positive community attitudes		<input type="checkbox"/>
	Promote environmental sustainability		<input type="checkbox"/>
	Facilitate land and resource access and use		<input type="checkbox"/>
	Promote a positive attitude to development and success on the West Coast.....		<input type="checkbox"/>
Infrastructure requirements are identified and progress supported.....		<input type="checkbox"/>	

Project Impacts (cont)	Please describe how the project will contribute to the outcomes ticked. For sustainable regional economic growth, please complete the Economic Impact Assessment (pages 6-9).	
	Are there any negative effects from this project on other West Coast organisations?	
Support	Does this proposal have the support of (please include letters of support):	
	Parent Body <input type="checkbox"/>	Recognised Industry Body <input type="checkbox"/>
	Key Stakeholders <input type="checkbox"/>	Other <input type="checkbox"/>
Financial Details	All figures must be GST inclusive. Please only provide financial details specific to this project. Please provide quotations where applicable.	
	Expenditure	
		\$
		\$
		\$
		\$
		\$
	<i>Total Expenditure</i>	\$
	Income	
	<i>Funds on hand</i>	\$
	<i>User fees / subscriptions</i>	\$
	<i>Sponsorship</i>	\$
	<i>Loans</i>	\$
	<i>Other Funding (as listed on page 5)</i>	\$
	<i>Other</i>	\$
		\$
	<i>Total Income</i>	\$
	What level of funding are you applying to Development West Coast For?	
	<i>Donation</i>	\$
	<i>Grant</i>	\$
<i>Loan</i>	\$	
<i>Sponsorship</i>	\$	
<i>Total</i>	\$	

Other Funding Sources For all approved amounts you will need to supply a copy of the confirmation notification	Funding Organisation	Amount Sought	Date of Decision	Approved (amount) or Declined
Other Funding Sources (cont)	Please give details why any funds that may be held by your organisation cannot be used for this project.			
	Please describe any donated materials or sponsorship for this project.			

Is there anything else in support of your application you would like to add?

2. ECONOMIC IMPACT ASSESSMENT

Note: please use additional pages if required and attach to the application form.

DIRECT BENEFITS			
Domestic Visitors Attracted	Domestic Visitor Bed Nights	Number of People =	
		× \$150.00 (Spend) =	\$
		× Number of Nights	
		=	\$
	Day Visits	Number of People =	
		× \$80.00 (Spend) =	\$
		× Number of Days	
		=	\$
		= Total Domestic Spend (A)	\$
International Visitors Attracted	International Visitor Bed Nights	Number of People =	
		× \$290.00 (Spend) =	\$
		× Number of Nights	
		=	\$
	Day Visits	Number of People =	
		× \$30.00 (Spend) =	\$
		× Number of Days	
		=	\$
		= Total International Spend (B)	\$
Any Additional Direct Spend (Project Spend, etc)	Comment		\$
			\$
			\$
			\$
TOTAL DIRECT SPEND:	Estimated Value (C)		\$
	TOTAL DIRECT SPEND (A + B + C) =		\$

Media Exposure	Please tick the boxes to indicate which type of media will be arranged for this project and provide an explanation for each category:			
	Detail/ Comment			Estimated Value
	TV Live, Domestic and/or International Market			\$
	TV Canned, Domestic and/or International Market			\$
	Local Print Media			\$
	National Print Media			\$
	International Print Media			\$
	Posters, Brochures (Distribution Details)			\$
	Other Publications (if any)			\$
	Is this media exposure marketing the West Coast and/or promoting the event? Please explain:			
Employment (Paid)	What number of people (if any) will be employed to work on this project (temporary for duration of project)?			
	Full Time Employment		Part Time Employment	
	No. of Employees		No. of Employees	
	Total Hours		Total Hours	
	What number of additional people (if any) will be employed after this project is completed (permanent ongoing)?			
	Full Time Employment		Part Time Employment	
	No. of Employees		No. of Employees	
	Total Hours		Total Hours	

FUTURE BENEFITS	
Will this event/project, or other event/project as a consequence, occur again in future years? YES <input type="checkbox"/> NO <input type="checkbox"/> (If YES, please explain)	
What are the future potential economic benefits that may occur as a result of this project? (Please explain)	
Outcomes	
Economic Impact	\$

OTHER BENEFITS	
What businesses (other than hospitality) will benefit from this project, and to what extent?	
Are there other future potential employment benefits as a result of this project?	
What other economic benefits or potential benefits are there for West Coast residents and businesses as a result of this project?	
What are the social, cultural and environmental benefits of this project?	

Any additional information that may help Development West Coast assess this application.	
Source(s) Of Information	Please state the source of any statistical information provided.

3. DECLARATION AND PRIVACY ACT 1993 AUTHORISATION

- a) On behalf of _____ (the Organisation), we the undersigned agree to the following conditions if we are funded by Development West Coast.
- b) This authorisation relates to information in this application that Development West Coast may hold about our organisation now or in the future.
- c) We hereby declare that I am/we are authorised to submit this application and that any funding received will be used for the project for which it was approved and in accordance with any conditions imposed by Development West Coast in full.
- d) We authorise Development West Coast to use this information for the purposes of administration of this application.
- e) We authorise Development West Coast to seek such information as they may be required to complete the consideration of this application.
- f) We hereby declare that the information provided is correct.
- g) Should funds be granted, we declare that we will demonstrate to Development West Coast how the proposal has met the agreed KPI's
- h) We declare that any unspent Development West Coast funding will be returned to Development West Coast if not required or if the organisation winds up or goes into recess.
- i) We declare that we will keep accurate records of the expenditure related to Development West Coast funding and that any files and records of this funding will be made available if requested.
- j) We declare that we consent to Development West Coast collecting, retaining and using personal contact details of the persons listed in this application. We confirm we obtained the consent of the persons listed in this application to provide these details and we acknowledge your right to have access to this information. This consent is given in accordance with the Privacy Act 1993.
- k) We authorise Development West Coast to advertise or publish the name of our organisation and the amount of the grant approved if this application is successful.
- l) We acknowledge that any decision made by Development West Coast is final.

Full name of authorised representative _____

Signature _____

Date _____

Position Held _____

Full name of authorised representative _____

Signature _____

Date _____

Position Held _____

4. CHECKLIST FOR SUPPORTING INFORMATION

Have you enclosed the following documentation to this application, where applicable?

1.	A copy of your constitution/rules or Deed of Trust. <i>(If applying for a loan, please highlight the relevant provision within the document allowing your organisation to borrow money.)</i>	<input type="checkbox"/>
2.	A copy of your audited financial statements. <i>(If applying for more than \$10,000, the financial statements must be audited by a Chartered Accountant.)</i>	<input type="checkbox"/>
3.	A financial update if your financial statements are more than 6 months old.	<input type="checkbox"/>
4.	A copy of a bank generated deposit slip.	<input type="checkbox"/>
5.	A copy of the letter from Inland Revenue Department approving your organisation as an income tax exempt entity.	<input type="checkbox"/>
6.	A copy of your Certificate of Incorporation.	<input type="checkbox"/>
7.	Letters of support from parent body, key stakeholders, recognised industry body, etc)	<input type="checkbox"/>
8.	A copy of the confirmation notification for any other approved funding.	<input type="checkbox"/>