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Welcome / He mihi

Hibiscus and Bays Local Board Facilities Grant

Hibiscus and Bays Local Board wants our community to have access to quality community facilities so people can lead active and healthy lives.

One of the ways we can do this is by assisting sport and recreation clubs, arts and culture groups and community organisations to improve or develop new facilities to meet community needs.

Purpose of the fund

It provides funding to assist in the development or renovation of community facilities. Types of projects funded by this grant scheme include:

- needs assessments,
- feasibility studies,
- investigation and design and
- small building works (lower priority)

Who can apply?

- sport and recreation,
- arts or
- community facilities

based within the Hibiscus and Bays Local Board area.

All applications must be completed online using this application form via the Auckland Council website.

Information required for application

The following information will be required:

About the project

- the cost of your proposed project (you will need to supply at least 1 quote)
- the expected number of additional users/participants once the project is complete
- are there partners involved? (ie another club, school or sporting organisation)
- whether your club/organisation is willing to share facilities with other groups
- whether any funding has been secured to date
- when the project is expected to begin

About the applicant

- the number of existing members, or participants who use the facility, including the number of:
 - adults over 18 years
 - children/juniors under 18 years

Other information required

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- financial statements for the last two years
- project budget
- copy of the club/organisation's lease and proof of land owner approval (if requesting funds for facility development on Council land)

Applicant contact details

* indicates a required field Organisation/Club Name * Organisation Name Physical Address * Address Suburb Town/ Postcode City Must be a New Zealand postcode. Postal address (if different from your physical address) ○ No Yes If yes, please complete below **Postal Address** Address Suburb Town/ Postcode City Website (if applicable) Must be a URL. Contact person's name * First Name Last Name Title

Contact person's position *

Contact person's mobi	le phone number *	k			
Contact person's emai	*				
Must be an email address.					
Organisation/club	details				
* indicates a required fiel	d				
What is the legal statu O O Incorporated Charitable Society Trust	us of your organisa O Limited O Sci Liability Company		roup? *	○ Other	Inform group/no legal
Tip: An informal group may	also be a "not for profi	t commı	unity group."		structure
O What is a legal structu	ıre?				
 Having a legal structure r incorporated societie trusts registered und companies with chates school board of trust Māori trust boards. If you are unsure please of communityfunding@auck	es der the Charitable Tr ritable purposes / so ees contact a grants adv	rusts Ac cial ent isor at	et 1957 Perprises		can include
Please indicate which o ○ Applying for up to \$1,0				: * ,001 and ove	èr
Applicants with no formal need to nominate an umb		apply	for grants up	to \$1,000 w	ithout the
Applicants with no form	mal legal structure	e seeki	ng grants (over \$1,001	. need to
Select one option belo	w *				

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- O Nominate an umbrella organisation (which has agreed to receive and administer the grant on your behalf) the umbrella organisation will be legally accountable to Auckland Council for the expenditure of the grant
- O Agree to have funds released via reimbursement after the project accountability has been satisifactorily completed

If you are unsure, check with a Community Grants Advisor 09 301 0101 | communityfunding@aucklandcouncil.govt.nz

What registration numbers apply to your organisation?

(Please provide all applicable numbers)

New Zealand Companies Office incorporated society number

Must be a number. Must be a number

Please click here to visit the Societies and Trusts website

Charities NZ Registration

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.

NZ Companies Register

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

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NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address
Must be formatted correctly. Companies Register number
Membership details
Please state the total number of members or users that actively make use of your acility (over a 1 year period). *
Please state the number of active members/users over the age of 18 years. st
Please state the number of active members/users under the age of 18 years. *
Over the last three years, please indicate the club/organisation membership/participation trend. * Participation has increased Participation has decreased Participation has stayed the same
Jmbrella Organisation Details / Ngā kōrero mō tō Rōpū Matua
indicates a required field
lame of your Umbrella Organisation * Organisation Name
Postal Address address
fust be a New Zealand postcode

Please click <u>here</u> for the postcode finder website

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Contact person *			
First Name	Last Name		
Position in organisa	ition *		
_			
Daytime contact nu	mber *		
-			
Must be a New Zealand	phone number.		
Email address *			
Must be an email addres	S.		
What is the legal st O Incorporated society	atus of your umbrell ty Oharitable		○ Limited liability company
New Zealand Comp	anies office incorpora	ated society nur	mber
Must be a number.			
Please click <u>here</u> to vi	sit the Societies and Tru	usts website	
Charities NZ Regist	ration		
	on Number provided wi check that you have e		up the following information Registration Number
New Zealand Charities I	Register Information		
Charity Registration			
Number			
Organisation Name			
Other Names			
Status			
Street Address			
Postal Address			
Telephone			
Fax			
Email			
Website			
Date Registered			

Must be formatted correctly.

NZ Companies Register
The NZBN provided will be used to look up the following information. Click Lookup above t 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
Must be formatted correctly.
Must be formatted correctly.
Project Details / Ngā pārongo mahinga
* indicates a required field
Project location and details
Is your proposed project for a facility which is Council owned? * O Yes O No If 'Yes,' please note that applications are not accepted for buildings which are Council owned.
Is your proposed project for a facility on Council land? * O Yes O No If your proposed project is on Council land, you will need to upload a copy of your lease agreement in the supporting documents section. Additionally, please ensure you have begun the landowner approval process if necessary.
Project Title *
Describe your project in a few sentences. Please include what it is you request funding for and a description of the overall redevelopment/renovation project. *
Up to 300 words
Please explain how you identified the need for this project. *

Up to 800 words	
Start date *	
Must be a date.	
End date *	
Must be a date.	
Partnership and collaborat	cion
Is your facility used by other g	roups, clubs or organisations? If so, please list. *
Is your club/organisation willin ☐ Yes ☐ No	ng to share this facility with other groups? *
Are other clubs/organisations ○ Yes	involved in developing or funding this project? * O No
If yes, please describe how ot	her clubs/organisations are involved?
i.e. planning, funding, development, v	olunteer work, etc.
Impact on participation	
Once the project is completed your organisation? * □ Yes □ No	, will it lead to an increase in participation within
	timate the expected number of additional members, in the next three years as a result of completing this
Project budget	
* indicates a required field	
GST registration	
Are you GST registered? * ○ Yes	○ No

• -		1 \$	
Please list item expenditure and description	Total cost of item	Amount of funding requested from the local board	Attach quote
If you or your group a amounts.	re not GST registered, p	olease do include GST (where applicable) in the
	re GST registered, pleas		
Please provide itemise board to fund.	ed costs for the propose	d project. Only list item	s you want the local
Table One: expe	nses/costs for the p	oroject	
Has any funding be O Yes Please provide the detail	en secured to date? *	○ No	
\$ Must be a dollar amount	organisation contribut	ing to this project?	
Must be a dollar amount		ing to this project?	
via this application		rom the Hibiscus and	d Bays Local Board
\$ Must be a dollar amount	i.		
tests or building wo	ost of the overall projects to complete the		
Must be a dollar amount			
	ost of this project? Th for in this application		oortion you are
, ,	oup are GST registered, oup are not GST register	•	
For the following ques	stions:		
Total cost			
Must be a number. Please provide all applic	able numbers.		
	neado promae year e		
If GST registered: p	olease provide your G	ST number. *	

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	\$	\$	
Ex. preparation of	Must be a dollar amount	Must be a dollar amount.	
feasibility study: 10			
hours @ \$30 p/h; design			
works; etc.			

Table two: funding sources for the project

This section tells us about any other funding that you hope to receive for this project, e.g. contestable funding from Foundation North, Department of Internal Affairs, Central Govenment contracts. Please include

- pending/approved funding requests
- applications made to other local boards
- the amount your organisation will contribute

Income	\$ Pending/approved
	\$
	\$
	\$

Budget Totals

Total Income Amount	Total expenditure amount	Income - expenditure	Total Amount Requested
\$	\$	\$	\$
This number/amount is	This number/amount is	Must be a dollar amount.	This number/amount is
calculated.	calculated.		calculated.

If only part of your project can be funded, how would you amend your project plan or make up the difference? *		

Supporting documentation

* indicates a required field

Bank details

teller)

Please provide bank account details: Proof of bank account may be one of these			
op.	tions: *		
	Bank deposit slip		
	Certified bank statement (certified means bank details stamped and signed by the bank		

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☐ Print screen or image capture of an on-lin holder name and bank account number. This	ne bank statement confirming the bank account must include the bank logo and URL.
Bank account proof * Attach a file:	
Attach ONE proof of bank account details	
Supporting Documents	
Financial statements for the two most reach a file:	ecent years *
Please upload minutes from your organi authorising your application Attach a file:	sation or a letter from an officeholder
Quote #2 for the proposed project (only Attach a file:	if you have a competing quote)
Copy of your lease agreement if your factorial Attach a file:	cility is on Council land
Other supporting information Attach a file:	
Declaration and Privacy	
* indicates a required field	
Note: Auckland Council reserves the right to a refund of a grant if any of the above inform	subsequently decline an application or request action is found to be incorrect.
I certify that to the best of our/my know application is correct *	_
○ Yes	○ No
I confirm that any funds granted will on this application *	ly be used for the activity described in
○ Yes	○ No

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Must be a date.

I confirm that to the best of our/my knowledge I/we have no perceived , potential or actual conflict of interest in applying for or using any grant funding * O Yes No			
For guidance on whether you have a perceived, potential or actual conflict as a result of applying for and using grant funding you should consider the following matters - if in doub you should declare the conflict.			
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			
 If you are an Auckland Council employee/local board member or a councillor If your organisations committee or board member is an Auckland Council employee/local board member. 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 e.g. investments that you have in entities that you will procure services from with the grant monies Employment relationships or membership of clubs e.g. 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. If you have answered no to any of the above, please provide details below: 			
Must be no more than 100 words • I/We understand that Auckland 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 agree to the above disclosure conditions in respect of my application. * ○ Accept ○ Decline			
Date: *			

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 "spam".

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How did you find out about this fund? *				
 Applied previously 	Council staff member	Poster/flyer	Word-of-mouth	
Council website	Local board member	○ Radio	Other:	
○ Council mail-out	 Local newspaper 	 Social media 		

Privacy

Any personal information that you provide in this form will be held and protected by Auckland Council in accordance with our <u>privacy policy</u> and with the Privacy Act 1993. Our privacy policy explains how we may use and share your personal information in relation to any interaction you have with the council, and how you can access and correct that information. We recommend you familiarise yourself with this policy.