

Community Project APPLICATION

Kei te ora te wai, kei te ora te whenua, kei te ora te tangata.

If the water is healthy, the land and the people are nourished.

APPLICANT DETAILS

Additional documentation can be provided by applicant if insufficient space available in application form.

CONTACT NAME OF APPLICANT:				
NAME OF ORGANISATION: (<i>if applicable</i>)				
TYPE OF ORGANISATION:				
Incorporated Society	Local community group			
Charitable Trust	lwi/hapū			
Educational facility (School/ECE/etc)	Other			
Details:				
Is your organisation GST registered? Yes No				
If yes, please state your GST number:				

ORGANISATION'S OBJECTIVES:

Contact phone number(s):
Email address:
Website address:
Postal address:

Physical address:

HOW DID YOU HEAR ABOUT THE MANAWATŪ- RIVER LEADERS' ACCORD COMMUNITY PROJECTS PROGRAMME?

NEWSPAPER

If so which one?.....

ONLINE/ WEBSITE

If so which one?

FRIEND/ COLLEAGUE

OTHER Please explain

APPLICATION DETAILS

NAME OF PROJECT:

What are the objectives of the project?

Please provide details of your funding request:

Start date of project:	 	
End date of project:	 	
Location of project:	 	

How will this project enhance the Manawatū River?

How will this project engage the community?

How will this project engage the local iwi/hapū?

Who will be involved with the project?

Please outline how your project will become self supporting without on-going financial contributions.

Demonstrate how the outcomes of the project would be maintained in the future.

Is this application supported by the wider community? (please attach letters of support if applicable)

Is this application supported by local iwi/hapū?

Will this project generate additional employment?

Does this project align with other environmental and employment initiatives?

Has funding for this project bee	n provided in the past?	Yes	No
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If yes, please list previous funding sources for this project over the past 24 months

Have you applied for funding from other sources for this project? Yes No If yes, please list the other sources you are seeking funds from:

Please attach a project plan and timeline Is this project continuing for longer than 1 year? Yes No If yes, list the milestones to be achieved over the project: Deliverables after Milestone 1 Deliverables after Milestone 2

If you require any advice on planting timeframes and species available please contact Horizons Regional Council's Freshwater Team **0508 800 800**

BUDGET

WHAT IS THE TOTAL BUDGET FOR THE PROJECT? \$

(include contributions from landowners or other funding sources, please identify the source and \$ amount)

What is the total amount (GST excl) that you are seeking from this application? \$.....

What does this funding include? (Please specify components of project seeking funding including administration costs.)

Activity	Description	Cost
Yr 1		

Please attach quotes if relevant

PROMOTION AND EVALUATION

Are there opportunities for Accord members or other community groups to take part in this project?

Yes No

If yes, please explain:

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If yes, please explain further

How will you evaluate the success of the project?

Is there any other information you believe is relevant to support your application?

CHECKLIST

- I have completed all sections of the application.
 - I have attached copies of quotes where applicable.
 - I have attached evidence of landowner's permission where applicable.

APPLICANT'S OBLIGATIONS

If your application is successful you agree and acknowledge on behalf of your organisation or group the following:

I agree to ensure that the sponsorship amount and any products or services received as part of the sponsorship will be used solely for the activities specified in this application and for no other purposes.
I agree to provide a brief report about the activity to Horizons Regional Council and provide photos if available within a timeframe of one month following the sponsored activity.
If this application is on behalf of an organisation, group or other entity I confirm that I have informed them of this application and will provide acknowledgement of sponsorship receipt via the entity supported (i.e. on official letterhead or alternative official means).
If the project is being carried out on land not owned by the applicant I confirm that I have sought permission from the landowner to carry out planned activity.
If the application is successful the applicant will need to demonstrate how they will meet their Health and Safety obligations.

NAME	
ORGANISATION	
SIGNATURE	
DATE	



WHAT HAPPENS NEXT?

If you would like some advice on completing your application please contact one of the Freshwater Team from Horizons who will be happy to provide guidance and attend a site visit if required

After we receive your application we will assess it against the criteria and other applications made. We will let you know whether or not your application is successful by **Friday 27 August 2021.**

TIPS FOR A SUCCESSFUL APPLICATION:

- Be clear and concise about what your project will achieve
- Include a project plan, budget breakdown and realistic timeline
- Detail how the project's outcomes will be maintained in the long-term.

SENDING IN YOUR APPLICATION:

To submit your form electronically please save and email it to freshwater@horizons.govt.nz. If you've printed this form off, please post your hardcopy application to:

MRLA Community Funding Programme c/o Horizons Regional Council Private Bag 11025 Manawatū Mail Centre 4442

Applications close 4pm, Friday 30 July 2021.

For all enquiries please contact Horizons' freshwater team on **freshwater@horizons.govt.nz** or on freephone **0508 800 800**.









Freshwater Improvement Fund

