



# Manawatu District Council

## Hook Bequest Funding Application Form

The purpose of the Hook Bequest is to

- *Help or assist any poor or needy person(s) who shall be bona fide resident(s) of Feilding*
- *Towards any charitable purpose(s) in the borough of Feilding*

NOTE:

Information contained in this application will be viewed by the Community Wellbeing Subcommittee only. Personal details will not become part of any public documentation.

***For eligibility and general information see page 4 of this application form.***

### **Applicant Details**

1. Name of organisation/applicant: \_\_\_\_\_

2. Residential Address: \_\_\_\_\_

3. Postal Address: \_\_\_\_\_

4. Phone: \_\_\_\_\_

Contact Person (if different from above):

5. Name: \_\_\_\_\_

6. Residential Address: \_\_\_\_\_

7. Postal Address: \_\_\_\_\_

8. Phone: \_\_\_\_\_

### **Referee Details**

- Please note applications must be endorsed by a social services organisation or other similar organisation that can verify the current circumstances of the applicant.

1. Name of organisation: \_\_\_\_\_

2. Contact Person: \_\_\_\_\_

3. Address: \_\_\_\_\_

4. Phone: (day): \_\_\_\_\_ (night): \_\_\_\_\_

**Project Details**

1. Please provide details of what you or your organisation is seeking funding for? *(Attach additional sheets if necessary)*

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. How will this project benefit the organisation, community or you?

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. What is the start date of your project? \_\_\_\_\_ What is the finish date of your project? \_\_\_\_\_

**Financial Details**

1. Please provide a detailed **budget** *specifically* for the reason which you are seeking assistance.

Note: (i) All figures must be GST inclusive.  
 (ii) A written quotation on all costs is to be attached

Cost of Project	\$
Total Cost of the project is	(A)

Your contribution	\$
Funds on hand	
Sponsorship	
Other grants (received)	
Other eg fundraising	
Total of your contribution is	(B)

To find out how much money you should apply for, subtract **your contribution (B)** from the **total cost of the project (A)**. The answer is the amount of money you require in order for the project to go ahead.

**How much money are you applying for?**

2. If you have applied to any other organisation(s) for **funding** please list the organisation(s), the amount of money you are applying for and the result of your application.

Organisation/s	Amount Requested \$	Date of funding decision	Approved / Declined or Under Consideration

3. Have you received funds from any organisation on the last 2 years? If yes, please give details below:

Funding Organisations eg	Project	\$ Received	Year
Creative Communities (New Zealand Scheme)			
Eastern and Central Community Trust			
NZ Lottery Grants Board			
Pub Charities/Licensing Trust			
Other			
Manawatu District Council			

4. Please record your GST Number (if applicable):

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

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*(Continue on back page if necessary)*

**Declaration:**

I/We consent to the Manawatu District Council collecting the personal contact details provided above, retaining and using these details to assess information supplied as part of this Hook Bequest funding application. I/We acknowledge my rights to have access to this information. This consent is given in accordance with the Privacy Act 1993.

I hereby declare that the above information supplied is correct.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Signed: \_\_\_\_\_ Signed: \_\_\_\_\_

Position in Organisation: \_\_\_\_\_ Position in Organisation: \_\_\_\_\_

Date: \_\_\_\_\_ Date: \_\_\_\_\_

**For organisations, please attach:**

- A current statement of income and expenditure, or a balance sheet from your organisation.

Check List

- Have you answered every question?
- Please check your budget figures are totalled correctly
- Have you included written quotations where applicable?
- Have you notified the referee?

**Please return your application to:**

Manawatu District Council  
135 Manchester Street  
Feilding

**or post to**

Attn: Sarah Anderton  
Manawatu District Council  
Private Bag 10 001  
Feilding 4743

## **General Information**

- The Community Wellbeing Subcommittee, made up of elected Councillors, will consider your application. The Subcommittee meets on the first Tuesday of every second month. In order for applications to be considered they need to be preferably received by the Democracy Support Officer one month prior
- The fund has accountability requirements, which successful applicants will need to fulfil
- Funding will not be given retrospectively
- Grants will be paid on receipt of invoices and or receipts and completion of the Accountability Form
- Assistance is more likely to be supported where the applicant contributes to the cost of the project

## **Eligibility**

- Applicants must be residents of Feilding
- Applications must be endorsed by a social services organisation or other similar organisation that can verify the current circumstances of the applicant

**Please spend time adequately preparing your application. If you have any further queries please feel free to contact**

**Sarah Anderton  
Democracy Support Officer,  
Manawatu District Council  
Ph 323 0000**

*sarah.anderton@mdc.govt.nz*