



# Hook Bequest



## 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’s Chairperson only. Personal details will not become part of any public documentation.
- **For eligibility and general information see page 3 of this application form.**

### Applicant details

1. Name of applicant .....
2. Residential Address .....
3. Postal Address .....
- (if different to above)
4. 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) .....

### Funding details

1. Please provide details of what you are seeking funding for? (Attach additional sheets if necessary)

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## Financial details

1. Please list below the item(s) and the cost of these item(s) for which you are seeking assistance.

**Note:**

- All figures must be GST inclusive
- A written quotation on all costs is to be attached

Item	Cost (GST Inclusive)	Your contribution	\$
		Funds on hand	
Total cost of the project is (A)		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. Please complete the below if you have received funding from Council before.

Date	Amount	Purpose

3. Please give details below if you have received funds or assistance from the below agencies in the past two years

Funding Organisations	Project	\$ received	Year
Work and Income (grants)			
School hardship grants / financial assistance			
Other			

4. Please provide any other relevant information (that would support your claim for this funding) ie special circumstances/needs, financial hardship issues.

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(Continue on another 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 .....

Signed ..... Date .....

## Check list

- Have you answered every question?
- Have you included written quotations?
- Have you notified the referee?
- Have you attached a letter from a social services organisation or other similar organisation that can verify your current circumstances and who supports your application?

## General information

- Upon receipt of your application it will be considered by the Community Wellbeing Subcommittee's Chairperson.
- You will be notified if your application has been successful within seven working days of receipt of your application.
- Funding will not be given retrospectively.
- Grants will be paid directly to the school or agency to which you have provided written quotations or invoices for
- Applications will not proceed until all the information, required by Council in this form has been provided.

## Eligibility

- Applicants must be bona fide persons in need of financial assistance.
- Applicants must be residents of Feilding.
- Applications must be endorsed by a social services organisation or other similar organisation that can verify that the applicant is in need of financial assistance.

## Need help?

Please spend time adequately preparing your application. If you have any further queries or need help with completing the application please feel free to contact

Vicki Wills, Community Development Adviser  
Manawatu District Council

**T** 323 0000 ext 751    **E** vicki.wills@mdc.govt.nz

**Please return your application to**

**Manawatu District Council**

135 Manchester Street, Private Bag 10 001, Feilding 4743

**T** (06) 323 0000    **F** (06) 323 0822    **E** public@mdc.govt.nz

[www.mdc.govt.nz](http://www.mdc.govt.nz)