



Application Form: Te Tai Pari Board – 2025 funding round

Purpose of the Te Tai Pari Board:

Te Tai Pari Board (“TTPB”) may offer grant investment to not-for-profit organisations, social enterprises, and businesses with public benefit to the community of Waitara.

Purpose of the funding:

Funding may be granted by the TTPB to encourage or enable:

1. community self-reliance, capacity building, and stability; or
2. opportunities for social, recreational, civic, or cultural participation or for reducing or overcoming barriers to such participation; or
3. community or environmental health; or
4. development or preservation of arts, culture, heritage, or community identity; or
5. sports or recreation; or
6. a greater understanding of the relationship that the Waitara hapū have with Waitara.

Are you an:

- ☐ * Not-for-profit organisation
- ☐ Social enterprise
- ☐ Business with public benefit
- ☐ Charitable Trust
- ☐ Incorporated Society
- ☐ Individual (some questions may not be relevant)

*Organisations whose purpose is NOT to generate income/revenue for one or more people are considered not-for-profit

Community Group/ Individual/ Organisation Name:

Primary Contact

Position held in organisation

Applicant Phone Number

Applicant Primary Email

Applicant Postal Address

Organisation's Physical Address (if different to above)

Bank account details

If your application is successful, funds will be deposited to this account.

Name of Bank

Account Name

Bank Account Number

Bank account verification *please attach with your application.

*Bank account name must match group applying.

Are you registered for GST?

☐ Yes ☐ No

GST Number- If applicable.

Is your service based in Waitara?

☐ Yes ☐ No

*your program/project must be based in Waitara to qualify for funding.

What does your organisation do?

Please keep this to 300* words or under.

Please estimate how many people will benefit from your proposed service?

Members	Users
<input type="text"/>	<input type="text"/>

Please describe in detail what you require the funding for?

Please explain the expected benefits of this funding?

Please select what area the funding will contribute to (please only select one area):

- ☐ Community self-reliance, capacity building, Community stability
- ☐ Opportunity for social, recreational, civic, or cultural participation or for reducing or overcoming barriers to such participation
- ☐ Community or environmental health
- ☐ Development or preservation of arts, culture, heritage, or community identity; or
- ☐ Sports or recreation
- ☐ Contribute to create a greater understanding of the relationship that the Waitara hapū have with Waitara.

Projected start date:

Projected end date:

This must be after board meeting date. Retrospective funding will not be granted.

☐ I confirm that this funding will not be used for the below:

Funding will not be made available for the purposes of:

- Religious activities.
- Political activities.
- Projects and programmes that duplicate existing services and organisations.
- Activities that contravene any policy or strategic objective of the Board.
- Commercial or private organisations whose purpose is primarily profit generation.

Please list all of the costs related to what you want to do/deliver. If possible, please also provide evidence of these estimated costs, such as quotes. If GST registered, please include the NET cost of the project.

Item	\$

TOTAL of Project/service/event costs

Total Expenditure Amount:

Income from other sources (confirmed only)

Please list all of the **confirmed** income you have sourced to assist you with this project/service/event. If GST registered, please include the NET amounts.

Income	\$

TOTAL Confirmed Income Amount

Income from other sources (unconfirmed)

Please list all of the **unconfirmed** income you have applied to assist you with this project/service/event. This may include organisations that you have already applied to and are waiting to hear from and organisations that you plan to apply to.

Income	\$	Date of outcome

TOTAL Unconfirmed Income Amount

Summary of funding request

Amount being sought from TTPB:

* Must be a dollar amount. The amount you are requesting should be the difference between your project costs and income.

Reserves/Tagged Funds

Please explain any Reserves or Tagged Funds (if any) that the organisation has.

You will be notified of the date and time of the board meeting in due course. Checklist

Please check that you have attached the following items with this application (these must be included):

- ☐ Verified bank statement or deposit slip (unless no changes to the previously provided version)
- ☐ Organisation's most recent financial statements (no older than 18 months)
- ☐ Organisation's rules (unless no changes to the previously provided version)
- ☐ Quotes/evidence of project costs (if possible)
- ☐ Copy of minutes resolving to apply for funding

Declaration

I confirm that I have the authority to make this application and in doing so accept these TTPB Terms and Conditions on behalf of my organisation and declare that:

I understand and accept the terms and conditions set out above, which will form a legally binding agreement with TTPB if our organisation/myself (as an individual) is successful in receiving a grant.

All the information provided for this request is true and correct to the best of my knowledge.

Our organisation is fully compliant with all applicable legislation, including the requirements under the Children's Act 2014 (if applicable), and is up-to-date with all statutory requirements.

I have been duly authorised by our governing body to commit our organisation to this agreement.

Our organisation has the following minimum set of internal controls in place:

At least two signatories to bank accounts.

Maintenance of a cash book or computer equivalent.

A person responsible for maintaining financial records.

Regular financial reporting to every full meeting of the governing body.

The ability to provide an income and expenditure statement, which reports what happened against the project applied for here, and if required, to supply proof of payments and purchases.

Full Name

Signature

Date

Thank you for your application, please review it and when you are happy send through to admin@tetaipari.nz. If you have any questions relating to the application form or process, please email admin@tetaipari.nz. **2025 applications close on 28 February 2025.**