



# **AKARANA**

## **COMMUNITY TRUST**

### GRANT APPLICATION FORM

**AKARANA COMMUNITY TRUST LIMITED**

PO BOX 76008, MANUKAU, AUCKLAND 2104

[www.akaranacommunitytrust.co.nz](http://www.akaranacommunitytrust.co.nz)

### ORGANISATION DETAILS

ORGANISATION NAME:

TYPE OF ORGANISATION:

PURPOSE OF ORGANISATION:

MAIN CATEGORY:

INCORPORATION NO:

NZBN NO:

GST REGISTERED:

Yes

No

SUB CATEGORY:

NZ CHARITIES REGISTRATION NO (IF APPLICABLE):

GST NO:

WEBSITE:

ADDRESS:

  
  

MAILING ADDRESS:

  
  

### CONTACT PERSON INFORMATION

FULL NAME:

POSITION:

MOBILE:

ADDRESS:

  
  

EMAIL:

### APPLICATION INFORMATION

GRANT APPLICATION PURPOSE:

- Accommodation    Rent or Venue Hire    Building / Facility maintenance    Event Costs  
 Transport    New Sports Equipment    Equipment Maintenance    Misc Operational Costs  
 Salaries & Wages    New Operational Equipment    Uniforms

SPECIFIC REASON FOR GRANT APPLICATION (THE PURPOSE OF THE GRANT I.E. WHAT IT WILL BE USED FOR) :

TOTAL AMOUNT REQUESTED:

GST INCLUDED:

Yes

No

BENEFITTING INDIVIDUALS ETHNICITY:

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### APPLICATION INFORMATION

HAVE YOU USED A PROFESSIONAL FUNDRAISER TO ASSIST YOU WITH THIS APPLICATION?

Yes  No

IS THERE A CONFLICT OF INTEREST (IF YES, PLEASE SUMMARISE THE CONFLICT OF INTEREST)?

Yes  No

CONFLICT OF INTEREST DETAILS (PLEASE PROVIDE DETAILS):

HAS THE APPLICATION ORGANISATION APPLIED FOR FUNDS FOR THE SAME PURPOSE FROM ANY OTHER SOURCE?

Yes  No

IF YES, PROVIDE FULL DETAILS:

DUPLICATE GRANT APPLICATION - IS THIS A SUBSEQUENT GRANT APPLICATION ATTEMPT TO AKARANA FOR THE SAME GRANT FOR THE SAME AMOUNT AND THE SAME PURPOSE?

Yes  No

DOES THE GRANT APPLICATION RELATE TO HIGH PERFORMANCE AND/OR ELITE SPORTS PERSONS?

Yes  No

ARE CASH PRIZES OR LARGE NON-CASH PRIZES ON OFFER AT THE EVENT?

Yes  No

DOES YOUR ORGANISATION PAY ANY SPORTS PERSON FOR PLAYING (NO MATTER HOW MODEST OR INFREQUENT)? IF SO, PLEASE DETAIL:

Yes  No

DETAILS OF PAYMENTS:

PLEASE DETAIL BENEFITING INDIVIDUALS GENDER (GENDER OF THE RECIPIENTS THE FUNDING WILL BENEFIT):

Male  Female  All  Other

### TERRITORIAL AUTHORITY AND REGION

PLEASE DETAIL THE TERRITORIAL AUTHORITY IN WHICH YOUR ORGANISATION'S HEADQUARTERS ARE LOCATED:

PLEASE SELECT THE MAIN TERRITORIAL AUTHORITY THAT WILL BENEFIT FROM THE FUNDING:

PLEASE SELECT OTHER TERRITORIAL AUTHORITIES THAT WILL BENEFIT FROM THE FUNDING:

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

# AKARANA COMMUNITY TRUST

## GRANT APPLICATION FORM

### FUNDING DETAILS

PLEASE DETAIL THE ITEMS THAT YOU ARE APPLYING FOR AND THE COST OF EACH ITEM (CONTINUE ON A SEPARATE SHEET IF NECESSARY):

Item	Supplier 1 - Preferred Quote	Cost (ex GST)	Supplier 2 - Competitive Quote	Cost (ex GST)

TOTAL REQUESTED:

PLEASE COMPLETE THE SECTION BELOW IF YOU ARE APPLYING FOR WAGES OR SALARIES:

Person	Title	Annual Salary or Hourly Rate	Total Hours Worked per week

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### CONDITIONS OF GRANT

As required by section 115A of the Gambling Act 2003, grant money must only be used for the specific purpose for which it was granted and in accordance with the conditions of the grant. Breach of section 115A is a criminal offence (\$10,000.00 maximum fine).

Copies of invoices, receipts and bank statements must be provided to Akarana Community Trust within 6 months of the grant being made to verify that the grant has been used in accordance with the purpose approved.

Any grant money which is not spent on the purpose approved must be returned to Akarana Community Trust within 6 months of the grant being made. We agree to reimburse Akarana Community Trust for all costs incurred (including legal costs on a solicitor/client basis) in recovering any outstanding grant money.

We agree to comply with any request from an officer of the Department of Internal Affairs and/or a representative from Akarana Community Trust for additional information in relation to how the monies received from Akarana Community Trust have been spent.

We also agree that an officer of the Department of Internal Affairs may direct an audit or inspection of the books, accounts, or data systems in which the proceeds of the grant have been deposited, by a Chartered Accountant and/or an officer of the Department of Internal Affairs.

We agree that the audit or inspection will be carried out in such a manner approved by the Department, within the time frame specified by the Department.

I agree to the terms and conditions

### GRANT APPLICATION REQUIREMENTS

#### Please complete the checklist below:

Attach two quotes or other evidence that the amount sought is reasonable.

Evidence of affiliation to a national body.

A printed bank deposit slip. The account name must be the same as the recipient organisation.

Ensure the application is for items which have not already been purchased.

Ensure you have not applied for funds for the same purpose from any other source.

Attach a copy of your certificate of incorporation.

Attach a copy of your signed full meeting minutes that record your organisation's resolution to apply for funding to Akarana Community Trust.

For grant applications greater than \$15,000, please attach a copy of your latest audited annual accounts.

Attach a list detailing the names of all your committee members or the members of your board of trustees and detail any association with an Akarana trustee or Akarana venue.

Ensure that this application is completed in full and signed by two senior members of your organisation.

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### DECLARATION

We declare that:

- The information provided in this application form is true and correct to the best of our knowledge.
- We have the authority to make this application on behalf of the applicant.
- This application has not been completed by a person who has any management or ownership interest in a Akarana Community Trust venue that hosts gaming machines (“a gaming machine venue key person”).
- When any grant money is obtained the persons who decide how that money is spent will not be Akarana Community Trust gaming machine venue key persons.
- When any grant money is obtained a check will be undertaken and no payment will be made from grant money to any Akarana Community Trust gaming machine venue key person for any goods or service.

We (the undersigned) make a solemn declaration conscientiously believing the same to be true and by virtue of the Oaths and Declarations Act 1957.

**SIGNATURE 1**

**NAME:**

**POSITION:**

**DATE:**

**SIGNATURE 2**

**NAME:**

**POSITION:**

**DATE:**

### OFFICE USE

**AMOUNT APPROVED:**

**GRANT NUMBER:**

**DATE APPROVED:**

**DATE FUNDS DEPOSITED:**

**CHEQUE NO /  
DIRECT DEBIT DETAILS:**

**NET PROCEEDS MEMBER:**

**NET PROCEEDS MEMBER:**

**NET PROCEEDS MEMBER:**

**NET PROCEEDS MEMBER:**

### SUBMIT APPLICATION

Please fill out, print and post your application with the supporting documentation to:

Akarana Community Trust  
PO Box 76008  
Manukau  
Auckland 2104