



# RUAPEHU DISTRICT COUNCIL

Private Bag 1001, Taumarunui 3946, New Zealand  
Telephone 07 895 8188 • Fax 07 895 3256  
Email info@ruapehudc.govt.nz  
Website www.ruapehudc.govt.nz

For Council Use

## Pride of Place Fund Application

**Applicant Details - Organisation**

Organisation: \_\_\_\_\_

Postal Address: \_\_\_\_\_

1 <sup>st</sup> Contact Person	2 <sup>nd</sup> Contact Person
Daytime Phone: _____	_____
Fax or Email: _____	_____
Are you GST registered? <span style="float: right;"><input type="checkbox"/> Yes <input type="checkbox"/> No</span>	
If yes, GST Number: _____	
Is your organisation: <input type="checkbox"/> An Incorporated Body <input type="checkbox"/> An Unincorporated Body	
<input type="checkbox"/> A Charitable Trust <input type="checkbox"/> Other (please specify) _____	
Where is your organisation based? _____	
_____	
_____	

**Project Details**

Describe in detail the project and purpose for which funding is sought: (attach separate sheet if necessary)

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\_\_\_\_\_

What area does your project cover? (i.e. Geographic area, ward, community. Include map if possible.)

Start date of project: \_\_\_\_\_ Finish date of your project: \_\_\_\_\_

Have you sought advice or assistance in planning the project?  Yes  No

If yes, please provide details of agency and/or contact person.

### Financial Details

List the full income and costs of your project (List each part of the budget, not just a total figure).  
**If registered for GST, do not include GST in the budget.**

Income	\$	Costs	\$
Cash in hand towards project	_____	_____	_____
Cash sponsoring	_____	_____	_____
Other grants	_____	_____	_____
Intended fundraising	_____	_____	_____
Other (specify)	_____	_____	_____
	_____	_____	_____
	_____	_____	_____
	_____	_____	_____

**Your Contribution is** \_\_\_\_\_ **Total Cost of Project is:** \_\_\_\_\_

How much funding are you applying for in this application?  
 (Project Costs less Project Income) \$ \_\_\_\_\_

List any other organisation you have applied to (or intend applying to) for funding this project:

Organisation	Amount Applied For	Approved / Declined / Pending

## Non-Financial Contributions

Give details of any donated materials/services (e.g, professional services, paint, timber, lighting, etc)

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What is the estimated number of volunteers hours involved in this project?

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## Declaration

I/We confirm that all details contained in this application are true and correct and that I/we am/are authorised to make this declaration. I/We further understand that, if this application is successful, I/we must complete a Certificate of Expenditure form upon completion of the project.

I/We agree to conform to any regulations which Council notifies us of.

*(Note: the persons signing here on behalf of an organisation should be the same contact persons as on page 1 of this application).*

**1<sup>st</sup> Contact Person**

**2<sup>nd</sup> Contact Person**

Name (Individual/Organisation):

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Signature:

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Position Held:

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Date:

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## Checklist

Please Check:

- Are all questions answered?
- Do your figures add up?
- Have you attached any additional information that may assist your application?
- Have you kept a copy of this application for your future reference?

Items which must be included in this application:

- Certificate of Incorporation or other similar certificates for your organisation.
- Deposit slip for bank account details.