

# Discretionary Fund

## Form Preview

### Waikanae Community Board Discretionary Fund Form

\* indicates a required field

#### **Applicant Details \***

First Name

Last Name

#### **Organisation (if applicable):**

#### **Address \***

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

#### **Daytime phone number \***

#### **Email \***

#### **Why do you need this funding? \***

#### **When do you need it? \***

Must be a date.

#### **What are the expected benefits to you (the applicant)?**

#### **What are the expected benefits to the Waikanae area?**

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### Budget

Income (fundraising, grants, saving, etc.)	\$	Costs (travel, accommodation, etc.)	\$	Where possible please provide written cost quotes
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	
	\$		\$	

### Budget Totals

#### Total Income Amount

\$

This number/amount is calculated.

#### Total Expenditure Amount

\$

This number/amount is calculated.

#### Income - Expenditure

\$

This number/amount is calculated.

### Total Amount Requested

\$

Must be a dollar amount.

Please note that the maximum grant payable is \$500.

Where an organisation anticipates that it will require ongoing annual funding, to be used for the same purpose each year, it may apply for three consecutive years of annual funding within a single application.

If such an application is approved, the funding will be released in annual instalments. The second and third instalments will only be released once the Community Board has received a satisfactory accountability report in relation to the previous year's funding.

**First-time applicants to the Discretionary Grants Fund will not be eligible for three years of annual funding.**

### Amount Requested Year 1

\$

Must be a dollar amount.

What is the amount (in dollars only) of the total requested funds committed in the first year?

### Amount Requested Year 2

\$

Must be a dollar amount.

What is the amount (in dollars only) of the total requested funds committed in the second year?

### Amount Requested Year 3

\$

Must be a dollar amount.

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What is the amount (in dollars only) of the total requested funds committed in the third year?

### Are you GST Registered? \*

- ☐ Yes  
☐ No

If yes, and your application is successful, you will be required to provide a GST invoice before your grant can be paid.

### What other funds have been sought for this project/activity?

Please list.

### Please list any grants received from the Waikanae Community Board in the past 3 years:

### Attach the following files:

- 1.A bank deposit slip, for direct credit payment if application is successful.
- 2.Supporting information that will help your application.

### Supporting documentation \*

Attach a file:

A minimum of 1 file must be attached.

Please attach all the files listed above that are relevant to your application.

### Proof of Bank Account, for direct credit payment if application is successful

Attach a file:

This must be a bank deposit slip or a screenshot of the bank account number.

### Declaration \*

- ☐ I certify that the information provided above is accurate: