

Community Board Promotions Funding Application Form



Which Community Board are you applying to?

- Cromwell Community Board
- Maniototo Community Board
- Teviot Valley Community Board
- Vincent Community Board

1. APPLICANT INFORMATION

Contact Details

Please ensure all contact details are completed

Name of Organisation: _____

Contact Name: _____

Address: _____

Telephone: _____ Mobile: _____

Email: _____ Website: _____

Organisation Details

a) How long has your organisation been in existence (tick)?

- Less than 1 year
- 2 – 3 years
- 4– 5 years
- More than 5 years

b) What is the Legal Status of your organisation (tick)?

- Charitable Trusts
- Incorporated Society
- Limited Liability Company
- Other (please specify)

2. PROJECT / EVENT INFORMATION

Name of Project / Event: _____

Project / Event Summary:

Please provide a description of your project / event and outline what you believe makes it great'.

Project / Event Objectives:

Please outline the main reasons this project / event is being held and your objectives.

Date(s) of project / event and duration:

From: _____ To: _____

Total Number of days: _____

Has the Event / Project happened before (tick)?

- No
- Yes

If **Yes**, when, where and how successful was the project. Please provide detail backed by references / testimonials and financial reports where available)

What is the frequency of the project / event (tick)?

- Annual (every year)
- Biennial (every 2 years)
- A One-off Event
- Other – Specify _____

Where will the project / event be held? (please specify which town(s))

What locations and/or venues will be used for your project / event

(please specify locations if applicable, including council venues, private venues, gardens and green spaces, streets and other public places.)

What other events / projects are occurring in the region at the same time as this event / project

3. FUNDING INFORMATION

How is your project / event being funded?

What is the total projected event / project expenditure \$ _____

What is the total projected event / project income:
(exclude any potential board funding) \$ _____

<i>Sponsorship</i>	\$		
<i>Grants from other Sources</i>	\$		
<i>In kind Support</i>	\$		
<i>Other</i>	\$		
<i>Total grants from other sources</i>	\$		

What is the estimated dollar value of Volunteer hours? \$ _____

What is the total promotion grant amount being sought by this application to the
Community Board? \$ _____

If successful what will the grant funding be used for.

Please detail the specific event / project expenses / costs to which the Board funding will be applied

NOTE:

You must attach with your application a detailed project / event budget showing projected expenditure and income.

4. APPLICATION EVALUATION

Each project / event within the applications will be measured against the promotion grant purpose and criteria. Please provide a brief explanation about how your project / event meets each item.

PURPOSE:	
Describe how your project directly enhances experiences of locals and visitors.	
How will your project attract / retain visitors.	
Which council / community strategies and plans support your proposal. e.g. Tourism Strategy, Arts Strategy, Outdoor Recreation, Community Plans. Link to Strategies	
How will your project deliver community outcomes e.g. social, environmental, economic and cultural enhancement.	
CRITERIA	
How will your project benefit the community and/or district.	
Describe the economic value of your project to the wider community.	
Describe the ability of your organisation to responsibly plan and administer the project.	

Please advise what Plans have you in place for the event / project?

(a copy of the plans must be made available on request)

- | | | |
|---|---|--|
| <input type="checkbox"/> Event Delivery Plan | <input type="checkbox"/> Business Plan | <input type="checkbox"/> Marketing Plan |
| <input type="checkbox"/> Budget & Financial Forecasts | <input type="checkbox"/> Health and Safety Plan | <input type="checkbox"/> Traffic Management Plan |
| <input type="checkbox"/> Waste Management Plan | <input type="checkbox"/> Contingency Plan | <input type="checkbox"/> Risk Mitigation Plan |
| <input type="checkbox"/> Crisis Management Plan | <input type="checkbox"/> Other | |
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5. DECLARATION

By completing and submitting this application, you certify and understand that:

- All information provided is up to date, true and correct;
- Should the funding not be used for the purpose outlined, the Council may request the funds to be returned.
- Any savings in the project and subsequent surplus of funds should be returned to Council.
- Council reserves the right to audit the Applicants project costs at any time
- Funding will be by way of a grant. All liaison with contractors, determining timeframes, informing the public and health and safety remain the responsibility of the Applicant.
- Council is not responsible for any over expenditure or cost increases in projects.
- By submitting this application the applicant acknowledges that the evaluation of applications has a subjective element and that Central Otago District Council is the final decision-making authority;
- Information about the application (incl. applicant name, project title, and a summary of the proposal) and any approved funding may be made publicly available by Central Otago District Council.
- If a project is approved, any grant of money is subject to a contract being entered into between the applicant and Central Otago District Council, including the requirement to acknowledge Central Otago District Council as a source of funding in signage, publicity and publications.

Signed: (This application should be signed by the Chair of your organisation)

Name: _____ Position: _____

Signature: _____ Date: _____

6. CHECKLIST

Have you included:

- A copy of the minutes from the meeting approving your funding application
- A project / event budget – include quotes if you have them
- A copy of your constitution
- A copy of your organisations financial report.
- Letters of support (if you have them)

7. SUBMITTING YOUR APPLICATION

- Email your completed application to alison.mason@codc.govt.nz
- Post your completed application to Central Otago District Council, PO Box 353, Alexandra, 9340