



## Application Form for Emergency Marae Repairs & Community Project Grants

Name of applicant:

Name of Marae, Historical Building or Project

### Guidelines

The Whanganui Trust is funded by Morikaunui Incorporation, together with interest on its invested funds. It was established for charitable purposes and has determined a focus on funder's shareholders, shareholding trust beneficiaries, and their descendants. This also extends to Marae and Churches in the Awa and Whanganui Awa School.

This form is to be used when applying a Marae Emergency Repairs grant or any other Community Project assistance. It is expected that applicants will have applied or are applying to all other potential sources of funding for their project.

Because the Trust has limited resources, it needs to be regarded as a potential source of top-up funding only. It is therefore expected that other funding applications will have been submitted or are being submitted at around the same time of this application. The Trust can consider this application and approve a grant subject to (i) the project having sufficient funding to proceed; and (ii) the need for the funding from the Trust, on the basis of other success or otherwise. Before any payment is made the Trust will require copies of all the responses to the other funding applications detailed in section 3.

While the Trustees have developed guidelines as a basis for considering Grant requests, they have total discretion on a case by case basis. One of the over-riding limitations is the availability of funds and this will vary each year, subject to the prior year's income.

Under the 2005 Charities Act, only registered Charities are eligible to receive grants. Any deviation from that puts the Trust's Charitable status at risk. The same criteria applies for all Community Trust applications.

The questions for which answers are sought in this application form may seem to be intrusive however in the interests of responsible governance, the Trustees need to satisfy themselves that the funding the Trust is looking to approve is going to be used appropriately, in accordance with the Trust Deed.

Grant applications for which this form should be used are:

	Sum applied for	Apply by initialling box
<u>Marae Emergency Repairs Grant [Annual Budget \$5,000]</u>		
▪ Emergency Repairs - covering urgent work to buildings etc		
<u>Other Grants</u>		
▪ Special Grants - Community Projects (on a case by case basis)		

### Trust contact

For all enquiries, please telephone 06 348 7213 or email [grants@whanganuitrust.com](mailto:grants@whanganuitrust.com). The Trust website is at [www.whanganuitrust.com](http://www.whanganuitrust.com).

**Send your application to: The Secretary, The Whanganui Trust, PO Box 4035, Whanganui**

Office use only:

Date received:

Receiver's initials:

## Project ownership

Name of Project owner [eg Trust, Incorporation, Incorporated Society, Other (specify)]

Charities Registration number: \_\_\_\_\_

Please supply names of:

Chairman \_\_\_\_\_

Secretary \_\_\_\_\_

Treasurer \_\_\_\_\_

How many other people are on the governance body? \_\_\_\_\_

Who elect/appoint the governance body? \_\_\_\_\_

How often are elections held/appointments made? \_\_\_\_\_

### Section 1

#### CONTACT DETAILS

Project contact person: \_\_\_\_\_

Postal address: \_\_\_\_\_

Daytime Tel: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

### Section 2

#### BANK ACCOUNT DETAILS

**Nominated Bank account details where payment is to be made:**

Name of bank: \_\_\_\_\_

Branch: \_\_\_\_\_

Name of account holder: \_\_\_\_\_

Account no:

### Section 3

#### FINANCIAL INFORMATION

What is the total value of your project? \$ \_\_\_\_\_

What funding is your entity committed to contributing itself? \$ \_\_\_\_\_

What funding are your members committed to contributing? \$ \_\_\_\_\_

Who has turned you down? (*Please supply copies of correspondence.*)

What other funding have you sought/are you intending to seek from?

1 \_\_\_\_\_ \$

2 \_\_\_\_\_ \$

3 \_\_\_\_\_ \$

4 \_\_\_\_\_ \$

**(Please include a copy of your ownership entity's latest financial report with this application.)**

Is any individual or entity being remunerated for their services relating to this project either from the applicant funds or by a party associated to the project and if so whom and how much? (If the area below is not sufficient for an answer, please attach an explanation.) Yes/No. If Yes, please elaborate, including names and amounts. (Without an answer, the application will be referred back.)

**Policy:**

1. Priority will be given to gazetted Marae with the greatest need.
2. Because of the nature of this assistance, an initial approach may be made via telephone to the office (06 348 7213). This would be followed by this written application.
4. Applicants need to apply or have applied to other funding sources such as the Lotteries Commission, Community Trusts etc.
5. The Trust reserves the right to approve Grants:
  - conditional upon the required level of funding being achieved;
  - of up to a given sum depending on the outcome of other funding applications.
6. Conditional approvals will be valid for a period of three months with the Trustees able to consider an extension of a further three months upon written application together with a progress report.
7. Payment arrangements will be by negotiation but will normally be staged in line with the progress of the project.
8. The Trust will consider an emergency grant of up to \$500.00.

**Please answer the following questions:**Address of the Marae: \_\_\_\_\_Briefly describe your project:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<b>Quotations:</b>	<b>Supplier</b>	<b>Amount</b>
Quote 1 - item 1	_____	\$ _____
- item 2	_____	\$ _____
- item 3	_____	\$ _____
- item 4	_____	\$ _____
	TOTAL	\$ _____
Quote 2 - item 1	_____	\$ _____
- item 2	_____	\$ _____
- item 3	_____	\$ _____
- item 4	_____	\$ _____
	TOTAL	\$ _____

***(Please ensure that copies of the quotes are supplied with your application together with plans and any local authority consents. DO NOT supply original documents.)***

**Return completed application to: The Whanganui Trust, PO Box 4035, Whanganui**