

MANGAWHAI ENDOWMENT LANDS ACCOUNT (MELA)

Application Form

1.	•		me	
2.			stal Address	
	-			
•				•
			ntact Person:	
Na	me		Position	
Ph	one		Email	
4.	Organisatio	on Pur	pose:	
••••				
5a.	. Is your or	ganisa	ation a Registered Incorporated Society?	
	Yes	No	If yes, please supply your registration number	
5b.	. Is your or	ganisa	ation registered with the Charities Commission?	
	Yes	No /	f yes, please supply your Charities Commission number	
5c.	If you have	e ansv	wered 'No' to questions 5a and 5b, is your organisation under an umbrella of another	
	organisatio	on tha	t is a Registered Incorporated Society or registered with the Charities Commission?	
	Please pro	vide t	the following umbrella organisation details	
	Name			
	Address			
	Registered	d Inco	rporated Society number	
	Charities C	Comm	ission number	
6.	Is your orga	anisat	ion GST registered?	
	Yes	No	If yes, please supply GST number	
Ρle	ease note:	lf your	r organisation is GST registered and you are making a taxable supply, Council shall no	t
be	obliged to r	make	any payment of the Grant plus GST until a valid GST invoice has been provided to	

Council, following the approval of the grant.



Describe the project you require funding for an	d how it fits the MELA c	riteria (please attach additional
sheets)		
8. Is your organisation/project located in the Mano		
9. What support do you have in the community fo		
about, who you have talked with about it and what	t response have you had	d. If you have undertaken any
surveys or petitions, then please include these)		
10. How are your principal functions and/or activity	es of a not for profit not	uro?
How are your principal functions and/or activiting	es of a flot for profit flat	ule?
11. Is this service or project already provided by a	nother group or agency	? If yes, what and by whom?
12. How much will your project cost? – Please pro	ovide all costs and all se	ources of income for the project
you are planning. Please provide a breakdown or	· · · · · · · · · · · · · · · · · · ·	•
Item	Cost*	Funding Source/in Kind
Total		



- * Please provide at least two quotes for each item. If your organisation is GST registered, please use GST exclusive pricing. If your organisation is not GST registered, please use GST inclusive pricing.
- 13. What is the amount you are applying for in this funding application?

item			Cost	
Total				
, ,	on have a conflict of interest with an	y of the co	ntractors providing th	пе
quotes? If yes, please complete the	table below.			
Name of person in your	Contractor	Relations	hip	
organisation and his/her role				
5. Does your project require a Res	source Consent and if yes, how will	this be fun	ded?	
6. Do you receive any funding from	n a central government agency?	Υ	es No	
f yes, which Agency(ies) and how r	nuch?			
7 What other sources of funding	have you gained and what funding o	lo vou inte	nd to apply for in ord	ler to
	current funding applications for Co	-		
external agencies)	у тринения	J		,
Will ongoing funding be required	d for your project? Yes		No	
f yes, how will this funding be obtai	ned?			



19. Please	include the following information to support your application:
	☐ Constitution, Rules or Trust Deed
	☐ Meeting minutes/standalone resolution (if applicable)
	☐ Reviewed or audited financial statement for the previous year
	☐ Quotes
	☐ Budget
	☐ Any other supporting
	documents
Contact pe	rson
•	organisation
Address	
Telephone	(home)(work)
Mobile	Email
Signature o	of contact person
Name of pe	erson completing this application
Position in	organisation
Contact – p	phone Email
Signature ((if different to contact person)



