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| **Application for Funding from Community Trust of Maniototo or Māniatoto Trust Fund** |  |

**Applicant Information**

Applicant’s name:

Community group or club:

Address:

Phone: Email:

Signature: Date:

Funding purpose:

**Please attach:**

* Full details or plan for your proposal
* Copies of cost estimates
* Last set of audited/reviewed accounts for your club or organisation

where appropriate

* Minuted resolution from club or organisation supporting the application
* GST number if applicable
* GST Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Funding amount: Date when funds are needed:

Have you applied for funding from any other organisation/s [ ]  Yes [ ]  No

If yes which organisation/s

It is recommended that a representative is available to speak to the application.

Please select how you would like to speak to the application:

[ ]  Applicant will speak to the application at the meeting

[ ]  Applicant will speak to the application remotely. E-mail address the meeting link invitation is to be sent:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please return completed application form to:

|  |
| --- |
| ***For Office Use*** |
| Application received on: |  |  |
|  |  |  |
| Financial accounts attached: | [ ]  Yes [ ]  No |  |
|  |  |  |
| Application considered by: | Māniatoto Trust Fund | [ ]  |
| Community Trust of Maniototo | [ ]  |
|  |  |  |
| Emergency grant requested: [ ]  Yes [ ]  No |  |
|  |  |

Asset Management Team Leader - Property
Ranfurly Service Centre
15 Pery St
Ranfurly

janice.remnant@codc.govt.nz

**Applications Close: Wednesday 31 May 2023 at 5.00pm**