

# Horowhenua Rural Halls Fund - Application Form - 2026-2027

## Form Preview

### Your Details

\* indicates a required field

#### Rural Hall Details

**Name of Facility: \***

Organisation Name

**Postal Address:**

**Type of Organisation: \***

**Certificate of Incorporation Number:**

(If Applicable)

**Charities Commission Registration Number:**

(If Applicable)

#### Contact Details

**Applicant Project Contact \***

First Name

Last Name

**Applicant Position: \***

**Applicant Primary Phone Number: \***

**Applicant Primary Email: \***

Must be an email address.

**Alternative Contact Person: \***

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### Role or Position of Alternative Contact in the Organisation:

### Email Address for Alternative Contact: \*

Must be an email address.

### Phone Number for Alternative Contact: \*

## Hall Tier

Please indicate which Hall Tier this application relates to.

### Hall Tier \*

- ☐ Tier One - The nine (9) original Hall Societies which include Ihakara Hall, Ohau Hall, Opiki Hall, Manakau Hall, Tokomaru Hall, Poroutawhao Hall, Koputaroa Hall, Moutoa Hall, Mangahao Hall (Mangaore)
- ☐ Tier Two - Other non-profit groups that maintain community halls for public use where there is no Rural Hall within a reasonable distance may also be eligible for a Rural Halls Grant (e.g. Waitarere Beach and Foxton Beach). Community Hubs / Marae and Churches may also be considered.

## Your Organisation

\* indicates a required field

## Your People

### How many volunteers does your organisation have?

Must be a number.

### How many people access your facility each year?

### Is membership to your organisation open to anyone who wishes to join? \*

- ☐ Yes
- ☐ No

### Is your facility open to non members (or the general public)?

- ☐ Yes
- ☐ No
- ☐ Other:

If 'No' please advise what restrictions are in place:

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**Do members pay an annual fee? \***

- ☐ Yes  
☐ No

**If you answered 'Yes' above, please advise the annual membership fee amount:**

\$

Must be a dollar amount.

## Project Details

**\* indicates a required field**

Proposed Improvements / Additions to Facility /Hall

**What is the name of the project or activity that you are seeking funding for? \***

**Describe in detail the proposed hall/facility improvement / addition \***

Provide a short description (100 words recommended) of your project - what would you like to achieve?

**When will the project or activity start? \***

Must be a date.

**When will the project or activity finish? \***

Must be a date.

**What value will these proposed improvements add to your community? \***

**Please describe and community input into this proposed project. \***

Priority Projects

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Council has determined that the following priorities will be applied in the assessment of applications lodged. Please indicate the priority area of this project below.

\*

☐ Priority One - Any project that is directly related to protecting the overall integrity of the hall/facility structure - this covers replacement of roofing/repainting of roof, replacement of cladding/repainting of exterior, provision/repair to water and waste water services and upgrading of/improvements to power supply.

☐ Priority Two - Projects involving the interior upgrading of the hall, including repainting/repairs of interior linings, ceiling and floor structures, repairs to / replacement of windows to a more maintenance free and secure arrangement, together with the upgrading of toilet facilities to lower maintenance, water conserving units and provision of new, more modern ovens.

☐ Priority Three - Projects that generally improve the visual appearance of the hall/facility interior, i.e. floor coverings (carpet, vinyl, etc.), kitchen cupboards, improved lighting with energy conservation capabilities, and seating.

## Project Financial Information

\* indicates a required field

### Are you GST registered?

- ☐ Yes - Do NOT include GST in your budget  
☐ No - Include GST in your budget

### GST No. (if registered)

### Bank Account

Account Name

Account Number

Must be a valid New Zealand bank account format.

## Project Budget

Write down all the costs of your project and include the details, eg materials, venue hire, promotion, equipment hire, artist fees and personnel costs.

## Expenditure Budget

**Item eg Window Replacement      Detail eg Aluminium Window      Amount eg \$300**

| Item eg Window Replacement | Detail eg Aluminium Window | Amount eg \$300 |
|----------------------------|----------------------------|-----------------|
|                            |                            | \$              |

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|  |  |    |
|--|--|----|
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |

### Total Costs

#### Total Expenditure Amount

\$

This number/amount is calculated.

### Income Budget

#### Income eg Hall Society Fun Detail eg Raffle draising

Amount eg \$3,750

|  |  |    |
|--|--|----|
|  |  |    |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |
|  |  | \$ |

### Total Income

#### Total Income Amount

\$

This number/amount is calculated.

### Budget Summary

#### Costs less income

\$

This number/amount is calculated.

#### Total amount (\$) requested from Horowhenua District Council \*

\$

Must be a dollar amount.

#### Minimum amount (\$) required from Horowhenua District Council to insure project success if 'partial funding' is offered \*

\$

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Must be a dollar amount.

### Previous Horowhenua District Council Grants

Tell us about other Horowhenua District Council grants you have received in the past three years.

| Date applied    | Project Title | Amount received          | Project completion report submitted |
|-----------------|---------------|--------------------------|-------------------------------------|
| Must be a date. |               | Must be a dollar amount. |                                     |
|                 |               | \$                       |                                     |
|                 |               | \$                       |                                     |
|                 |               | \$                       |                                     |
|                 |               | \$                       |                                     |
|                 |               | \$                       |                                     |

### Other Funding Applications

Tell us about any other funding you have applied for or received for this project.

| Date applied    | Who to? | How much?                | Confirmed? |
|-----------------|---------|--------------------------|------------|
| Must be a date. |         | Must be a dollar amount. |            |
|                 |         | \$                       |            |
|                 |         | \$                       |            |
|                 |         | \$                       |            |
|                 |         | \$                       |            |
|                 |         | \$                       |            |

### Attach Files

\* indicates a required field

**Bank deposit slip or certified bank statement in the name of the organisation \***

Attach a file:

**A copy of the latest financial statements (such as balance sheet and profit/loss statement)**

Attach a file:

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**Attach copies of two written quotes for each item over \$250 to be purchased with the grant**

Attach a file:

**Add photos to support your proposed project**

Attach a file:

## Declaration

\* indicates a required field

## Terms and Conditions

You must read and agree to the following before submitting your application. Please select each box to show that you have read the information and agree to each section.

**If this application is successful, I/we agree to: \***

- ☐ Spend the grant within nine (9) months of a grant request being approved, within the approved time frame specified in the Accountability Reporting and Payments schedule or upon request by Horowhenua District Council (whichever comes first). Payment of any subsequent grants may not be made until all milestone accountability reporting requirements are met in full.
- ☐ Spend the grant only for the purpose(s) approved by, and subject to any conditions imposed by, the Horowhenua District Council Community Recognition and Funding Committee.
- ☐ Return to the Horowhenua District Council any portion of the grant that is not spent on the approved purpose(s). If the grant payment includes GST, the grant recipient must also return the GST component of the grant.
- ☐ Make any files or records relating to the activity or project available for inspection within 10 working days if requested by Horowhenua District Council.
- ☐ Keep financial records that demonstrate how the grant was spent for five (5) years after the end of the agreement term.
- ☐ Acknowledge the receipt of Horowhenua District Council grant as a separate entry in its financial statements, or in a note to its financial statements.
- ☐ Inform Horowhenua District Council of any changes that affect the organisation's ability to deliver the activity(ies) or project(s) (eg changes to financial situation; an intention to wind-up or cease operations; or any other significant event, or failure to meet child protection standards), before the grant has been fully used.
- ☐ Agree to notify Horowhenua District Council if any of the grant money is stolen or misappropriated and to consider if Police charges need to be laid.
- ☐ Agree that Horowhenua District Council have authority to publish that the grant has been made to the grant recipient for the approved purpose.
- ☐ Request approval from Horowhenua District Council for any variations to this agreement before different expenditure is made.
- ☐ Agree that failure to comply with any of the terms and conditions within this agreement, or the provision of false information in the request may result, without limitation, in Horowhenua District Council terminating this agreement and: a. Requiring repayment of all or part of the grant. b. Withholding payment of this and other Horowhenua District Council administered grants until issues are resolved. c. Imposing additional terms and

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conditions before any Horowhenua District Council funding is approved. Recommending to the Community Recognition & Funding committee, to decline future funding.

☐ For the purpose of gaining or providing information relevant to the funding of the organisation, the Horowhenua District Council may disclose to, or obtain information from, any other government department or agency, private person or organisation.

## Privacy

The information supplied in this application form will be held and used by the staff of Horowhenua District Council. The information will not be disclosed by Horowhenua District Council unless legally required under the Local Government Information and Meetings Act 1987 or for one of the purposes in connection with its collection. The information supplied will be used for:

- Assessing and processing this application and for administration purposes
- Updating existing Horowhenua District Council Funding records
- Providing information on your group and project for inclusion on the committee meeting agenda
- Enabling us to tell you about related services provided by Horowhenua District Council
- Providing Horowhenua District Council with statistical information to assist policy development.

You have the right to request access to, and correction of, information collected and held by Horowhenua District Council. Any requests for access should be addressed to your local community funding advisor.

By entering your name in the space below you are electronically signing this form.

## Signing

By entering your name in the space below you are electronically signing this form and agreeing to the terms and conditions above.

**Name: \***

**Date: \***

Must be a date.