

EOI for Event Partnership Fund

Form Preview

Contact details

* indicates a required field

Organisation contact details

Organisation *

☐ Individual ☐ Organisation

Organisation Name

First Name

Last Name

Must match the name on the bank account information supplied

Primary Address

Address

Please click [here](#) for the postcode finder website

Organisations website

Must be a URL.

Organisations Facebook page

Must be a URL.

What registration numbers apply to your organisation?

(Please provide all applicable numbers)

Incorporated society number

Must be a number.

Please click [here](#) to visit the Societies and Trusts website

Charities NZ Registration

EOI for Event Partnership Fund

Form Preview

The Charity Registration Number provided will be used to look up the following information. Click Lookup above to check that you have entered the Charity Registration Number correctly.

New Zealand Charities Register Information
Charity Registration Number
Organisation Name
Other Names
Status
Street Address
Postal Address
Telephone
Fax
Email
Website
Date Registered

NZ Companies Register

The NZBN provided will be used to look up the following information. Click Lookup above to check that you have entered the NZBN correctly.

New Zealand Companies Register Information
NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address

Primary contact details

Primary contact *

Title	First Name	Last Name

Position held in organisation

--

Phone Number

--

Must be a New Zealand phone number.

EOI for Event Partnership Fund

Form Preview

Email *

Must be an email address.

Event Information

* indicates a required field

Local board grant details

Amount requested from local board *

Event details

Event title *

Event Venue *

This means the building name, street address, location of event or venue where the project will happen.

Start date *

a date

End date *

a date

Event start time *

Estimated total attendance

Must be a number.

Estimated exhibitors participants

Must be a number.

Total estimated running cost *

Must be a dollar amount.

Upload current event budget including full income and expenditure *

Attach a file:

Please tick which of the following is attached *

☐ Pre printed bank deposit slip ☐ Certified bank details

EOI for Event Partnership Fund

Form Preview

Upload bank document *

Attach a file:

Are you GST registered? *

☐ Yes

☐ No

What is your GST number? *

Must be a number

IRD Donee status *

☐ Yes

☐ No

Event Funding Sustainability

Other funding sources

This section tells us about any other funding that you hope to receive for this event, e.g. contestable funding from Foundation North, Department of Internal Affairs, Central Government contracts. Please include applications made to other local boards

**Funding organisation or in Amount
dividual**

Pending / approved

	\$	
	\$	
	Must be a dollar amount.	

What other actions have been taken to reduce the level of reliance on local board funding?

Smoke-free and zero waste Auckland

Please tell us how you will promote smoke-free messages with your project

Word count:

Must be no more than 120 words.

EOI for Event Partnership Fund

Form Preview

Will your project include waste minimisation (zero waste) messages? if so please describe.

Please click [here](#) to find more information on zero waste events.

Māori Outcomes

Auckland Council provides funding for Māori and wider organisations to uplift Māori well-being and achieve outcomes with Māori.

Consider the Māori outcomes in the [Hibiscus and Bays Local Board Plan 2023](#) or [Kia Ora Tāmaki Makaurau Plan](#).

Will your event target Māori or Māori outcomes?

☐ Yes

☐ No

Please select which Māori outcome applies to your project?

☐ Māori led - either a Māori organisation that is applying or Māori directed (came about as a request from Māori) ☐ Māori involvement in the design/concept ☐ Māori focus - tikanga (practices), mātauranga (knowledge), reo (language) ☐ Māori participation - Māori priority group, target group, high representation or Māori staff delivering

Maori outcomes include Maori events, Maori sculpture and public art or protection of Maori cultural heritage eg waahi tapu. Marae, Improving Maori social, economic, and cultural well-being. Uses matauranga and tikanga Maori and works with mana whenua or Maori organisations to produce shared outcomes.

Please explain how your project/activity will achieve the above Māori outcomes

Word count:

Must be no more than 120 words.

Must be no more than 120 words

Declaration and Privacy

*** indicates a required field**

Declaration

Note: Auckland Council reserves the right to subsequently decline an application or request a refund of a grant if any of the above information is found to be incorrect.

I/We certify that to the best of our/my knowledge the information contained in this application is correct *

☐ Yes

☐ No

I/We confirm that any funds granted will only be used for the activity described in this application *

☐ Yes

☐ No

EOI for Event Partnership Fund

Form Preview

I/We confirm that I/we will submit to the local board an accountability report and supporting paid invoices and receipts (GST exclusive) that applies to GST registered groups, within 60 days of the completion of my/our activity *

☐ Yes

☐ No

For guidance on whether you have a perceived, potential or actual conflict as a result of applying for and using grant funding you should consider the following matters - if in doubt you should declare the conflict.

A conflict of interest could arise where you (the applicant) have a responsibility as a result of receiving council grant monies. This could affect another responsibility, duty or relationship you may also have.

For example:

- If you are an Auckland Council employee/local board member or a member
- If your organisations committee or board member is an Auckland Council employee/local board member.
- Personal or family relationships that you have
 - with council employees
 - with council contractors
 - organisations or persons that you will procure services from with the grant monies
- Financial relationships
 - eg investments that you have in entities that you will procure services from with the grant monies
- Employment relationships or membership of clubs
 - eg you intend to procure services with the grant monies from your employer or a club you are a member of - who will benefit financially from the arrangement.

I/We confirm that to the best of our/my knowledge I/we have no perceived , potential or actual conflict of interest in applying for or using any grant funding *

☐ Yes

☐ No

If you have answered no to any of the above, please provide details below:

Must be no more than 100 words

- **I/We understand that Auckland Council is bound by the Local Government Official Information and Meetings Act 1987**
- **I/We understand that my/our name and brief details about the project may be released to the media or appear in publicity material**
- **I/We understand that I/we have the right to have access to this information**
- **I/We undertake that I/we have obtained the consent of all people involved to provide these details.**

*

☐ Accept

☐ Decline

EOI for Event Partnership Fund

Form Preview

Date:

When your application is submitted you will receive an automatic confirmation email that the application has been received from Smartygrants. If you do not receive an email confirmation, please check to see if the email has been treated as "spam".

Privacy

Any personal information that you provide in this form will be held and protected by Auckland Council in accordance with our [privacy policy](#) and with the Privacy Act 1993. Our privacy policy explains how we may use and share your personal information in relation to any interaction you have with the council, and how you can access and correct that information. We recommend you familiarise yourself with this policy.