WMIF 2026 Med/Large Grants-Application Form
Form Preview

Welcome / He mihi

Waste Minimisation and Innovation Fund (WMIF) – Medium to Large Projects

This form is for WMIF grants between $5,001 and $50,000.

Because this is a larger funding request, we need a more detailed project description to help assess its impact and manage any risks.

- More info about the fund click here - Waste Minimisation and Innovation Fund (WMIF)
- Summary of Auckland Council's key priorities of the Waste Management and Minimisation Plan (WMMP): Click here.
- For smaller grants ($1,000 and $5,000): Use the WMIF 2026 Application Form – Click here.

Before You Apply

Please read the Waste Minimisation and Innovation Fund – Applicant guide for medium and large grants

They explain:

- What the fund is for
- Who can apply
- What costs are covered
- What info you need to include
- How applications are assessed

How to Apply

- Use this online form only.
- You can save as you go - it autosaves when you move to a new page.
- Include all supporting documents, even if you've applied before.
- Council may request two project referees if your project is successful.

Important Notes

- The fund can pay for up to **50% of your project cost, maximum $50,000.** You must show that the **other 50%** will come from your own money, other funders, or free support (like volunteer time or donated items).
- **Funding decisions** for this round will be made in **November 2026.**
- The funding period is **1 December 2026 to 1 December 2027.**
- **Don't start your project** until you've received a funding decision.
- **We can't reimburse costs** from before the agreement is signed.
- All consenting and health & safety requirements must be planned or addressed by the applicant before any funding can be approved.

Need Help?

Email: aucklandwastefund@aucklandcouncil.govt.nz

#phone (09) 301 0101 (Weekdays, 8:00 am to 3:00pm)

Organisation Details / Ngā Taipitopito mō te Rōpū

* indicates a required field

Applicant Details

Applicant/Organisation Name *
Organisation Name

Please briefly describe what your organisation does and what its main purpose is. *

Word count:
Must be between 20 and 300 words.

Physical Organisation Address *
Address

Address Line 1, Suburb, Town/City, Postcode, and Country are required.

Postal Organisation Address *
Address

Address Line 1, Suburb, Town/City, Postcode, and Country are required.

Website details (if applicable)

Must be a URL.

Project contacts

Please provide details for two key contacts:

- **Admin Contact** - the person responsible for managing the application and day-to-day communication.
- **Signatory Contact** - the person authorized to sign the funding agreement on behalf of your organization.

Admin Contact person

Name *
Title First Name Last Name

Signatory Contact person

Name *
Title First Name Last Name

Position *

Position *

Phone Number *

Must be a New Zealand phone number.

Phone Number *

Must be a New Zealand phone number.

Email Address *

Must be an email address.

Email *

Must be an email address.

Project dates

Projects must start on or after 01 December 2026 and be completed no later than 1 December 2027 unless agreed otherwise with council.

When do you expect your project to start?

Start date *

Must be a date and no earlier than 1/12/2026.

When do you expect your project to end?

End date *

Must be a date and no later than 1/12/2027.

Project Location

What is the address of your project site?

Address

Suburb

Town/ City

Postcode

Please click here for the postcode finder website

Local Board Area:

In which local board area(s) will your project be delivered? **Please select all that apply**

If you are unsure of what your local boards are, use our Local Board finder here.

Regional

○ All local board areas

Central local boards

☐ Albert-Eden
☐ Great Barrier
☐ Maungakiekie-Tāmaki
☐ Ōrākei
☐ Puketāpapa
☐ Waiheke
☐ Waitematā
Please select all that apply

North local boards
☐ Devonport-Takapuna
☐ Hibiscus and Bays
☐ Kaipātiki
☐ Rodney
☐ Upper Harbour
Please select all that apply

South local boards
☐ Franklin
☐ Howick
☐ Māngere-Ōtāhuhu
☐ Manurewa
☐ Ōtara-Papatoetoe
☐ Papakura
Select all that apply

West local boards
☐ Henderson-Massey
☐ Waitākere Ranges
☐ Whau
Please select all that apply

Organisation Type

If your organisation is not a legal entity, you will also need to nominate an organisation that has agreed to receive and administer the grant on your behalf, and be legally accountable to Auckland Council (on page 4).

If you are unsure, check with the Waste Planning Advisor (Initiatives) on 09 301 0101.

What is your organisation/group type? *
○ Business (e.g. limited liability company (not registered as a charity), private member organisation, business association etc)
○ Charitable Organisation - (e.g. relief, educational, religious, environmental, and community groups that operates for purposes that benefit the community)
○ Māori Entity or Organisation (e.g. A Māori organisation includes iwi, hapū, marae, kura kaupapa Māori, kōhanga reo, or other iwi owned and led entities such as a Māori Authority; or a Māori-owned business (defined as companies, partnerships, sole traders with Māori ownership by tangata whenua with Māori whakapapa.)
○ School or ECE (e.g. public or private educational facility, tertiary education, early childhood, kura, English second language / ESOL etc)
○ Other:

Registration Numbers

***What registration number applies to your organization?** *
○ New Zealand Business Number
○ Incorporated Society
○ Charitable Registration Number
○ New Zealand Companies Number
○ Other

To search for your company number: Click here.

New Zealand Company Number *

Must be a number.

Please describe the relevant registration numbers for your organisation.

Other - Please describe

Word count:
Must be no more than 50 words.

New Zealand Business Number *

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

Must be formatted correctly.

For your Incorporated society number: Click here. Enter in the box below:

Incorporated society number *

Must be a number.

NZ Charity Registration Number (CRN) *

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

Must be formatted correctly.

Group Relationships (if any)

Please tell us if your organisation is connected to a national or regional body (e.g. a larger organization like an umbrella group, network, or association, Auckland Council, elected members).

If your group has no connections, please click 'No" below.

Is your group connected to a national or regional body? *

○ Yes ○ No

What is the organisations name you are connected to?

Connected Organisations Physical Address

Address

Suburb | Town/ City | Postcode

Must be a New Zealand postcode

Please click here for the postcode finder website

Is your postal address different from your physical address?

○ Yes ○ No

Connected Organisation Postal Address

Address

Suburb | Town/ City | Postcode

Must be a New Zealand postcode

Brief description of the organisation you are connected with, including its main purpose or activity *

Word count:
Must be between 20 and 300 characters.

Please click here for the postcode finder website

Connected organisation website details (if applicable)

Must be a URL.

If you are not a legal entity, you have to nominate an umbrella organisation.

Will another organization (like an umbrella organisation) receive and manage the grant for you? *

○ Yes ○ No

School Information / He Kōrero mō te Kura

* indicates a required field

Do you work with the Sustainable Schools team, or are part of the Enviroschools programme? *

○ Yes ○ No

Please provide contact details for your Sustainable Schools/Enviroschools Advisor *

What is the school type? *

☐ Early Childhood ☐ Primary ☐ Intermediate ☐ Secondary ☐ Kura Kaupapa Māori ☐ Kōhanga Reo

Other

What is the School roll? *

Must be a number.

Please describe how your school manages their waste right now? *

Please upload a letter from the School Principal or School Board authorising your application *
Attach a file:

Have you conducted a waste audit? *
☐ Yes ☐ No

Waste audit results

Please attach/upload any supporting documentation *
Attach a file:

Please explain how the project will be used across the school.

- How many classes will take part
- How it will affect the school runs
- How it will be part of classroom learning

*

Word count:
Must be no more than 300 words.

Which of the following people will be involved in the project? *
☐ Students ☐ Teaching Staff ☐ Groundsperson/Property Manager ☐ Management & Administration Staff ☐ Students Families ☐ Organisation Board ☐ Community Members
Other

At least 1 choice must be selected.

Please explain who will manage the project once it is complete, including how it will be maintained. *

Umbrella Organisation Details / Ngā kōrero mō tō Rōpū Matua

* indicates a required field

Umbrella Organisation Name *
Organisation Name

Please give a short description of the umbrella organisation. Include what the organisation does and what it's main purpose is *

Word count:
Must be between 20 and 300 words.

Umbrella Organisation Physical Address *
Address

Suburb | Town/ City | Postcode

Must be a New Zealand postcode

Umbrella Organisation Postal Address *
Address

Address Line 1, Suburb, Town/City, Postcode, and Country are required.

Website details (if applicable)

Must be a URL.

Please click here for the postcode finder website

What is your umbrella organisation/group type?
○ Business - e.g. limited liability company (not registered as a Charity), private member organisation, business association etc.
○ Charitable Organisation - e.g. Registered with the Charities Commission, including a trust, community group, not for profit, incorporated society, charity etc.
○ Māori Entity or Organisation (e.g. A Māori organisation includes iwi, hapū, marae, kura kaupapa Māori, kōhanga reo, or other iwi owned and led entities such as a Māori Authority; or a Māori-owned business (defined as companies, partnerships, sole traders with Māori ownership by tangata whenua with Māori whakapapa.)
○ School or ECE

○ Other:

Contact Details

Please provide details for two key contacts:

- Umbrella Org Admin Contact - the person responsible for managing the application and day-to-day communication.
- Umbrella Org Signatory Contact - the person authorized to sign the funding agreement on behalf of your organization.

Umbrella Org Admin Contact *
Title | First Name | Last Name

Designated admin contact for the project

Position

Phone Number *

Must be a New Zealand phone number.

Email Address *

Must be an email address.

Umbrella Org Signatory Contact *
Title | First Name | Last Name

(NOTE: For SCHOOLS, please provide contact details of School Principal)

Position

Phone Number *

Must be a New Zealand phone number.

Email Address *

Must be an email address.

Umbrella Organisation Registration Numbers

What registration numbers apply to your organisation?

(Please provide all applicable numbers)

***What registration number applies to the umbrella organisation?** *

○ New Zealand Business Number
○ Incorporated Society
○ Charitable Registration Number
○ New Zealand Companies Number
○ Other

To search for your company number: Click here.

New Zealand Company Number *

Must be a number.

Other registration number

Please describe the relevant registration numbers for your organisation.

Other - Please describe *

Word count:
Must be no more than 50 words.

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

Incorporated society number *

Must be a number

Please click here to visit the Societies and Trusts website

Charities NZ Registration *

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

Project Information / He Kōrero mō te Kaupapa

* indicates a required field

Project Overview

Projects must include a new waste minimisation activity.

This could be:

- **a completely new idea, or**
- **a big improvement or expansion of something you already do**

The proposed project is: *

○ A new initiative

○ Expansion in the scope or coverage of existing activities

Project Title *

Must be no more than 10 words

Please select which project type category best fits your project. *

☐ Resource recovery / recycling equipment or infrastructure project.
☐ Community education and/or behaviour change project.
☐ Research, data, feasibility, innovation or trial project, for ways to reduce or minimise waste.

Source of Waste for your Project

Which waste source will your project focus on? *

☐ Household / Domestic / Marae Waste
☐ Commercial / Business / Schools & Kura waste

What type/s of waste will your project focus on? *

☐ Recyclable items/materials
☐ Reusable items/materials
☐ Organic Waste
☐ E-Waste
☐ Hazardous Waste
☐ Plastics
☐ Packaging
☐ Textiles
☐ Construction and Demolition waste

☐ Other:

Project Description

Tell us what the project is about, what it aims to achieve, and how it will help reduce waste going to landfill.

What is your project about? *

Word count:
Must be no more than 300 words.
Provide a short description (100 words recommended) of your project - what are you out to do?

How will it reduce waste? *

Word count:
Must be no more than 200 words.

Strategic Benefit & Key Project Priorities

The WMIF supports projects that help reduce waste and protect the environment, in line with Auckland Council's Waste Management and Minimisation Plan (WMMP) 2024 - Summary of Key Prioirities.

Your project should:

- Target priority waste streams,
- Reduce environmental harm, or
- Make better use of resources.

Please select at least ONE objectives below that best match your project.

Select at least 1 of the following strategic objectives that are most relevant to your project? *
☐ Objective 1: Organisations and individuals take responsibility for designing out and avoiding waste in the first place and keeping products and materials in use as long as possible.
☐ Objective 2: Organic waste is prevented or diverted from landfill and recovered for reuse.
☐ Objective 3: We have a well-supported, capable and accessible resource recovery network of infrastructures across the region to support resource recovery, waste reduction and deliver community and Māori outcomes.
☐ Objective 4: We have robust data and information to target our efforts to minimise waste while protecting the environment, and safeguarding health and wellbeing.
☐ Objective 5: Our total waste volumes are reduced sufficiently so that the need for final disposal is minimised.

☐ Objective 6: Litter and illegal dumping is minimised, reflecting increased awareness of its impact on the land, waterways and the sea; including the impacts of plastic pollution.
☐ Objective 7: In times of disaster, all sectors work together to keep communities safe from contaminated waste while supporting needs for replacement goods and diverting waste where possible.
☐ Objective 8: Harmful waste is avoided, and residual waste is managed and treated to prevent harm to health and wellbeing and to the environment.

Note: Projects focused on litter or illegal dumping will only be considered where they are centred on waste minimisation outcomes such as prevention, education, or behaviour change. Activities that replace or duplicate core council functions (e.g. clean-up, collection, or enforcement) are not eligible for funding.

Outcomes

Describe the outcomes you expect from your project. Based on the objective(s) you selected, outline the specific changes your project will achieve and how these align with WMIF outcomes.

Outcomes typically reflect change over time and may include:

- **Immediate/Short-term outcomes:** skills, knowledge, confidence, motivation
- **Intermediate/Medium-term:** actions, behaviours, or policy change
- **Long-term:** social, environmental, or economic impacts

Consider both the type of change and when it is likely to occur.

Immediate outcomes occur directly following an activity (e.g. within 1 month); medium-term outcomes are those that fall between the short and long-term outcomes (e.g. between 1 month and 2 years); and long-term outcomes are those we expect to see years later (e.g. 2, 5, 10 or 50 years after the activity).

Your outcomes	**Timeframe**	**Alignment with our outcomes**	**How does your intended outcome link to our outcomes?**
What changes do you expect will occur as a result of your project (e.g. Reduced organic waste)? Please be brief. One per row Must be no more than 25 words.	When do you expect this outcome to emerge?	Which of our outcomes will your project contribute to? If multiple apply pick the most relevant. No more than 1 choice may be selected.	Please explain how your intended outcome helps contribute to ours. Must be no more than 25 words.

Your metrics

A metric is a measurement used to show whether progress towards an outcome is occurring, and how much change is achieved.

Please define the metrics you will use to measure your project’s impact.

You may include:

- **Outcome metrics** – measure change (e.g. waste reduced, behaviour change)
- **Activity metrics** – measure what you deliver (e.g. number of workshops, participants)

Tips:

- Use clear, quantifiable measures (e.g. kg, %, number of people)
- Keep metrics relevant and realistic
- Focus on a few meaningful metrics rather than many

Example: If your metric is "Kgs of waste diverted", your baseline may be 0 Kgs (if no current system exists), or your current level of diversion. You would then provide a targetand explain how you will collect this data.

At the end of your project, you will report against these metrics to demonstrate your outcomes.

Metric	Type of metric	Baseline data	Target	Collection method	Explanatory notes
Which metrics will you track? List one per row. Add more rows if you want to list additional metrics.	'Activity metrics' measure what your project delivers (e.g. number of workshops, participants engaged, or bins installed). 'Outcome metrics' measure the waste minimisation impact achieved (e.g. kilograms of waste diverted from landfill, reduction in contamination, or increased recycling behaviour).	Please provide baseline data for the selected metric. This should describe the current situation before your project begins. Where possible, include measurable information (e.g. current waste volumes, number of participants, or existing practices). Must be a number.	Identify a target for the metric you have chosen - an estimated total for your project. Must be a number.	How will you collect and verify the data? E.g. waste audits or bin weighing, contractor or facility reports. Must be no more than 25 words.	Add notes if you need to provide more context. Must be no more than 25 words.

Māori Outcomes

Auckland Council uses the Tāmaki Ora Māori Outcomes Framework to understand and measure how projects contribute to Māori wellbeing across key outcome areas (pou).

Learn more about the Tāmaki Ora Māori outcomes performance measurement framework

Will your project deliver Māori Outcomes? *

○ Yes - Directly (Māori-led, Māori-designed, or delivered in partnership with mana whenua or Māori organisations, with shared decision-making or leadership)

○ Yes – indirectly (supports Māori outcomes but is not Māori-led; for example, through targeting Māori audiences, incorporating mātauranga Māori, or delivering outcomes aligned with kaitiakitanga, environmental benefits, improved access, or inclusive design)
○ No
○ Not sure

Please select the outcome area(s) (Pou) that your project will contribute to
☐ Iwi Ora (Iwi Wellbeing)
☐ Te Taiao Ora (Environmental Wellbeing)
☐ Tuakiri Ora (Cultural Identity Wellbeing)
☐ Huatau Ora (Future Wellbeing)
☐ Te Hapori Ora (Whānau and Community Wellbeing)
☐ Whai Rawa Ora (Economic Wellbeing)
☐ Marae Ora (Marae Wellbeing)

Provide a plan on how your project will deliver Māori Outcomes in the selected area

This section allows you to outline how your project will contribute to and deliver on each selected Māori Outcome area. Please use the "+" button to add each relevant outcome area, along with a detailed description of how your project will achieve it.

Select the relevant Māori outcome area (Pou)	Provide a plan on how your project will deliver Māori Outcomes in the selected area

Project impact on others

Are you aware of other waste minimisation initiatives in your area? *
○ Yes ○ No

If yes, please provide details and explain how your project will affect them.

Word count:
Must be no more than 200 words.

Will your project continue once WMIF funding has ended? *
○ Yes ○ No

Does this project require any resource consents, or modifications to existing resource consents, to be implemented? *
○ Yes ○ No ○ Other:

If yes, please provide details, including the status of the consent(s): Upload Resource Consent

Attach a file:

If yes, please provide details and explain how the project will be carried on and remain self-supporting.

Word count:
Must be no more than 300 words.

Project Plan / Te Mahere Kaupapa

* indicates a required field

Project Tasks

Please fill in the table to show what tasks you will do for the project and when you will do them. One task per row.

You can look at the examples to help you: Click here.

What will you do?	By when? (date)	What will you achieve?

Project Delivery

How will you make sure your project is finished on time, stays within budget, and is successful? Please explain how you will manage it. *

Word count:
Must be no more than 200 words.

What skills or experience does the person leading this project have? Please describe. *

Word count:
Must be no more than 150 words.

Is anyone working on the project with you, or affected by it? If yes, tell us who they are and what they will do? If NO, write 'N/A'. *

Word count:
Must be no more than 150 words.

Project Budget / Te tahua ā-kaupapa whakahaere

* indicates a required field

GST

Auckland Council grants are provided as a contribution towards your project and are not payments for goods or services. This means the grant itself is **not subject to GST**, and GST is not added to the funding amount.

Important information:

- List all of the costs associated with your project **(excluding GST)** and supply quotes to substantiate these
- **GST is not covered under the WMIF.** Please be aware that this may add additional costs for your organisation
- **You must cover at least 50% of the total cost of the project with your own resources or time in kind**

Is your organisation (or umbrella organisation) GST registered? *

○ Yes ○ No

GST Number *

Must be a number

Table 1. Project Costs

Please list in the table below all of the project **costs to be covered by the (WMIF)** Waste Minimisation and Innovation Fund. List one item per row.

Include costs such as:

1. **New Equipment or Materials** Things you need to buy for the project (e.g. bins, tools, laptops).
2. **External Services** People or companies you pay to help (e.g. contractors, designers, legal support).
3. **New Staff Costs** New staff or extra hours for current staff working on the project. Include hourly rate and number of hours they will work.
4. **Other Project Costs** Other things you need to pay for (e.g. travel, venue hire, printing).
5. **Total Project Cost** This will be automatically calculated in the *Totals* section of the project budget.

Do not enter any in-kind contributions (e.g. donated items, cash, volunteer time etc) in this table. This information must be entered in the in-kind contribution budget table in the next section.

Description of project costs	Total value of item ($, GST excl)	Attach quote/s for each individual item

e.g. description of equipment or material, including number and cost per item (as a clear basis for the total cost provided in the next column).	Must be a dollar amount.	Applicants must provide quotes or examples of cost for each item.

Table 2. Costs covered by you

Include all the ways your organisation is helping to fund the project.

This can be:

1. **Cash from your organisation**
   - Money your organisation is paying directly (e.g. from your budget, other grants, donations).
2. **Free Support (In-Kind Contributions)**
   - Things or time given for free, with a dollar value:

-
  -
    - Volunteer time
    - Staff time
    - Donated items or equipment
    - Free use of office space or venues

Please do not include any additional funding you will receive from other sources in the table. This information can be entered into the 'Other Source of Funding' table in the next section of the budget.

Description of project costs	**Total value of item ($, GST excl)**	**Attach quote/s for each individual item**
e.g. description, cash, volunteer time (100 hrs @$25/hr), donated laptop, staff time (project manager, 50 hrs @ $50/hr), including number and value per item (as a clear basis for value entered in next column).	Must be a dollar amount	
	$	

Table.3 Other Sources of Funding

Please tell us about any other money that will help pay for your project.

This can include:

- **Grants** from other organisations
- **Donations** from people or businesses
- **Loans**
- **Partner support** (cash or free help from another group)

For each one, say:

- Who is giving the money
- How much they are giving

This helps show that your project has support and meets the WMIF rule:**Your organisation must pay at least 50% of the total cost.**

Who is giving the money?	Amount ($)	Is this funding approved or pending?
e.g name of the funder/ organisation	e.g. How much they are giving Must be a dollar amount.	

Table.4 Budget Totals (Auto-Calculated)

This section adds up all the costs in your budget table. It shows:

- **Total project cost of project** - The full cost of your project (cash + in-kind)
- **Total costs covered by you** - what your organisation is paying for (cash and free support, donated items)
- **Other Sources of Funding** - money from other funders, grants, or donations

*These totals help check that your budget meets WMIF funding rules, including the **50% applicant contribution.**

Please attach your budget spreadsheet (if applicable)

Attach a file:

Total cost of project (excluding GST)

$

This number/amount is calculated.
This value is calculated from the total project costs (Table 1), Costs covered by you (Table 2), and Other Sources of Funding (Table 3).

Total value of all costs covered by you (50% applicant contribution)

This number/amount is calculated.
This number/amount is calculated from Tables 2 and 3.

Total Amount Requested from WMIF

$

This number/amount is calculated.
Total of "value of Item" column in Table 1.

Partial Funding

If a partial amount is requested the amount must be more than $5,001 and less than the total of amount of funding requested.

Will you accept less funding if the full amount isn't available? *

○ Yes ○ No

If yes, which parts of the project will it support, e.g. which equipment or services? *

Word count:
Must be no more than 200 words.

How much partial funding will you accept? *

Must be a dollar amount and no more than 50000.

How will less grant money affect your project? *

Word count:
Must be no more than 200 words.

Supporting Detail

Please upload evidence of your bank account details. The account name must match the applicant's name or, if applicable, the name of the umbrella organisation. *
Attach a file:

e.g., bank deposit slip, or bank statement (not older than 3 months), or a letter from the bank on the bank's letterhead confirming the bank account holder name and bank account number, or a print screen or image capture of an on-line bank statement confirming the bank account holder name and bank account number. This must include the bank logo and URL)

Please provide any additional information regarding your project budget, e.g. quotes for equipment or services
Attach a file:

Supporting Documentation / Ngā puka tautoko

Other Supporting Documentation

Please attach any other documents to support your application and/or help us understand your project.
Attach a file:

e.g. Photos, Letters of support, Feasibility study etc

Umbrella Organisation Supporting Documentation (if applicable)

Please provide documentation from the Umbrella Organisation showing agreement to act on your behalf.
Attach a file:

Previous Support from Auckland Council

* indicates a required field

Have you received any grants or contracts or other funding arrangements from Auckland Council in the past five years? *
○ Yes ○ No ○ Don't Know

Please list previous funding received.

Application Number	Project Description	Amount received	If you have more than four previous projects supported by Auckland Council you can upload a list here.
E.g. - WMIF2025-041			
		$	

Demographics / Ngā tatau taupori

* indicates a required field

Please tell us which ethnic groups will benefit from your project?
○ Specific ethnic groups ○ All/everyone

If you selected 'Specific ethnic groups', which ethnic group(s) will your project target? Select all that apply *
☐ New Zealand European ☐ Other European ☐ Māori ☐ Pacific Peoples ☐ Chinese ☐ Korean ☐ Indian ☐ Other Asian ☐ Middle Eastern ☐ Latin American ☐ African
Other

Declaration and Privacy / Ngā whakīnga whai pānga me te noho tapu o ngā kōrero

* indicates a required field

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 2020.

Our privacy policy explains how we may collect, use, and share your personal information in relation to your interactions with the council, and how you can access and correct that information. We recommend that you familiarise yourself with this policy.

A summary of the information in this application may be presented to relevant governing authorities and/or decision-making committees at public workshops or meetings. This may include details such as the project seeking funding, expected outcomes, funding history of the applicant, and the amount applied for. The name of the applicant and legal status may also be included; however, addresses and contact details will not be shared.

The personal information collected in this application will be used to ensure we have appropriate points of contact and to provide governing authorities and/or committees with a clear understanding of the project, including its purpose, intended outcomes, and delivery team.

A brief summary of this application may also be used for media releases. Accountability information may be featured in positive media or communications stories; however, this is optional and consent will be sought through the accountability reporting process.

For an example of the details given you can find minutes and attachments at the Auckland Council Agenda and Minutes page.

Declaration

- **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.**

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

I/We confirm that I/we will submit to the Auckland Council an accountability report within 60 days of the completion of the funded activity and understand that we will not receive our final payment instalment until Auckland Council has received and approved the Project completion report. *
○ Yes

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

Acceptance of Conditions

Please read the following statements and decide below if you accept those conditions.

Conflict of Interest - Please Read

Before you apply, think about whether you have any personal or work connections that could affect how you use the grant money.

You might have a conflict-of-interest if:

- You work for Auckland Council or are a local board member or councillor.
- Someone on your team or board works for Auckland Council.
- You have close personal or family relationships with:
  - council staff or contractors
  - people or businesses you plan to pay with the grant.
- You have money invested in a business you plan to pay with the grant.
- You plan to pay your employer or a club you belong to, and they will make money from it.

If you have identified an actual/potential conflict of interest, please contact us on aucklandwastefund@aucklandcouncil.govt.nz to declare before submitting your application.

Accept *
○ Accept

Date: *

Must be a date.

How did you find out about this fund?

○ Applied previously
○ Council staff member
○ Poster/flyer
○ Word-of-mouth
○ Council website
○ Local board member
○ Radio
○ Other:
○ Council mail-out
○ Local newspaper
○ Social media

Contact Database

I would like to be added to the mailing list to be advised of any updates regarding the Waste Minimisation and Innovation Fund *
○ Yes
○ No
You may opt-out at a any stage by emailing aucklandwastefund@aucklandcouncil.govt.nz

Confirming Your Application

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".

If you need assistance please contact the Waste Planning Advisor (Initiatives) at *aucklandwastefund@aucklandcouncil.govt.nz* or phone (09) 301 0101.