

Community Grant Application Form



APPLICATION FOR COMMUNITY GRANT

Application details

Please print clearly

Community Board	Mercury Bay		
Name of Organisation	Hot Water Beach Lifeguard Service Inc		
Contact name	Gary Hinds		
Position	Chairman	Postal address	PO BOX 103
Telephone number <small>include area code</small>	0274550097		WHITIANGA
Email	hindzy@xtra.co.nz		

Is your organisation a legally constituted incorporated society? YES NO

What are the goals of your organisation?

We are a lifeguard service that saves lives and prevents drownings. We provide our service at Hahei (3 weeks) and Cathedral Cove (9 weeks) during peak summer time and at Hot Water Beach from Labour Weekend through til Queens Birthday weekend. We provide water safety at events in our area and also provide education around being safe in the ocean and our rivers, lakes, waterways.

Describe the specific purpose the community grant funding is required for.

We are applying for funds to cover the resource consent and fees to construct a watch tower and storage facility within the road reserve at the southern end of Hot Water Beach.

Please detail the complete cost of the project.

ITEM, Description of project costs	COST
Resource consent fees	\$ 2,100 .00
addition costs (if needed)publically notified	\$ 15,000.00
costs to change road reserve to public reserve	\$ 20,000.00
building consent costs	\$ \$5,000.00
	\$
	\$
	\$
Total	\$ 42,100.00

42,100.00

How much are you applying for?

Please specify where the remaining funding will come from.

Have you received any funding from any Government agency in the past three years?
If so please detail below.

No

Please advise if your organisation is under the umbrella of a national organisation.

SURF LIFESAVING NEW ZEALAND

Please outline how your project will benefit the community.

As HWB is an iconic tourist destination the project will enable our lifeguards to provide assistance to the many people who enter the water and find themselves unable to swim or are caught in a frequent rip.

Additional Information

Please add any further information you consider may assist with your application 

Our GST number is 052 483 313

Information Enclosed with Application

Please enclose the following with your application form

- If your organisation is registered for GST, please supply your GST number.
- A budget projection for the next 12 months.
- Statement of Income and Expenditure for previous financial year.

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Declaration

In making this application I declare that:

1. I am authorised to do so.
2. To the best of my knowledge all key information has been disclosed and all information in the application is true and correct.
3. If the application is successful, agree to enter with good faith into a Service Level Agreement or to complete an Expenditure Declaration stating how the Community Grant has been expended with the Community Board.

I agree with the declaration stated above, for and on behalf of the organisation.

Full Name	GARY ARTHUR HINDS
Designation	CHAIRMAN
Signed	Date (DD/MM/YYYY)

Please send your completed application to:

Community Grants
Thames-Coromandel District Council
Private Bag
Thames 3540