

Applicant Information:

PO Box 15, Te Kauwhata 3741 Email: water@tkwa.co.nz

Free Phone: 0800 TKWATER (0800 859 283)

Web Site: www.tkwa.co.nz

Administration Manager: Emma Adams

Application for Charitable Donation – 2025

<u>Eligible Donees</u>: Any individual, charity, welfare organisation, educational institution, sporting club or similar entity operating, in whole or in part, within the district. "District" refers to the areas surrounding Te Kauwhata, Meremere, and Rangiriri that can be serviced by Association Assets and any future extensions.

<u>Ineligible Donees</u>: Applications from local authorities, government departments, commercial entities, political parties, individuals, or organisations that breach the Human Rights Act, or that are not freely open to members from the whole community, or where the donation is wholly or partially for personal gain, will not be considered.

Official Name of Applicant: Charity Registration # (if applicable):			
Name of Person Submitting Application:			
Contact Details: Phone:Email: _			
	Amount Sought: \$		
•	 Is there a deadline for receiving these full 	unds? YES / NO. If YES, what date:	
Pr	Project Details:		
1.		ow does your organization intend to spend these funds? Please provide full details, including ne budget, names of suppliers, contractors, quotations received, etc.:	
2.	2. Funds on Hand for Project: \$		
3.	Amount to be Raised from Other Fundraising: \$		
4.	Sources of Additional Funds (if any):		
5.	 (Add extra pages if necessary) 5. Has an application been made to anoth If YES, please provide details: 	her donor for this project? YES / NO.	
	Conditions of Donations (unless otherwise agreed in		
•		eipt of funds. Copies of all invoices/receipts issued by suppliers for the hin 180 days of receipt of funds.	
No		ditor of the applying organisation to certify that this donation has been	
	Authorisation: This application must be so organization. By signing, the organisation	signed and authorised by two representatives of your agrees to the above conditions.	
Signed:		Signed:	
Full Name:		Full Name:	
Position:		Position:	
Contact Details:		Contact Details:	

Submission Instructions: Please email or mail your completed application.