

Community Grants Application 2026

Form Preview

Applicant Details

* indicates a required field

Applicants: please note

Before completing this application form, you should have read the programme criteria and guidelines: [Community Grants](#).

Incomplete applications and/or applications received after the closing date will not be considered.

If you have any questions in regards to these guidelines and or criteria, please email **grants@tasman.govt.nz**

If you do contact us throughout the application process, please quote the application number below.

Application Number

This field is read only.

Grant Programme Name

This field is read only.

The program this submission is in.

Applicant

☐ Individual ☐ Organisation

Organisation Name

First Name

Last Name

Please complete

Organisation

Please complete either your company's or incorporated society's NZ Business Number (NZBN) or NZ Charity Registration Number (CRN) below, if applicable.

Find your organisation's NZBN here: <https://is-register.companiesoffice.govt.nz/>

Find your organisation's CRN here: <https://register.charities.govt.nz/CharitiesRegister/Search>

Applicant Organisation NZBN (if applicable)

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

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NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address

Applicant Organisation CRN (if applicable)

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.

Contact Details

This is the person we will contact if we have any queries about the application.

Name *

First Name

Last Name

Email Address *

Must be an email address.

example@example.com

Phone Number *

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Must be a New Zealand phone number.

Physical Address

Address

Any, but at least one field is required.

Postal Address

Address

Any, but at least one field is required. Country must be New Zealand

Umbrella Organisations

An umbrella organisation can be used when a group:

- 1.Is informal and has no bank account in its own name.
- 2.A letter of agreement to umbrella an organisation must be uploaded in the attachments section.

Are you using an umbrella organisation for this funding request? *

- ☐ Yes
☐ No

Applicant Bank Account

Applicant Bank Account *

Account Name

Account Number

Must be a valid New Zealand bank account format.

Bank deposit slip or other official printed document showing bank account name and number

Attach a file:

All new applicants must provide bank confirmation details

Is your organisation GST registered? *

- ☐ Yes
☐ No

If yes, please provide your GST number

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Project Details

* indicates a required field

Project Title *

Must be no more than 250 characters.

Project Category *

- ☐ Arts, culture, heritage and museums
- ☐ Community and economic development initiatives
- ☐ Emergency services
- ☐ Environment
- ☐ Festivals and events
- ☐ Social services
- ☐ Sport and recreation facilities
- ☐ Youth and children

Please choose one category that aligns best with your project.

Project Start Date *

Must be a date and no earlier than 21/9/2026.

Project End Date

Must be a date.

Summary - Brief project description *

Word count:

Must be no more than 100 words.

Describe your project in one or two sentences.

What do you want funding for? Provide project background and describe the community needs your project is going to address. *

Tell us why your initiative is needed, and why you believe the activities you propose will produce the outcomes you seek. Provide statistics/evidence (where available) of both the need and the link between the work you will do and the outcomes you seek. Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

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Who will benefit most from your project? *

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Describe the people or groups in the community who will benefit and how many individuals do you expect to reach.

Outcomes and Activities

Outcomes

Outcomes are the changes you expect to occur for your targeted audience. Generally, outcomes can be framed as an increase or decrease in one or more of the following:

- Skills, knowledge, confidence, aspiration, motivation (these are generally immediate or short-term outcomes)
- Actions, behaviour, change in policy (these are generally intermediate or medium-term outcomes)
- Social, financial, environmental, physical conditions (these are generally long-term outcomes)

Make sure your outcomes align with the one or more of the Tasman District Council's outcomes:

SOCIAL WELLBEING

- Our communities are healthy, safe, inclusive and resilient
- Our urban and rural environments are people friendly, well planned, accessible and sustainably managed
- Our communities have access to a range of social, cultural, educational and recreational facilities and activities

ECONOMIC WELLBEING

- Our region is supported by an innovative and sustainable economy
- Our infrastructure is efficient, resilient, cost effective and meets current and future needs

ENVIRONMENTAL WELLBEING

- Our unique natural environment is healthy, protected and sustainably managed

CULTURAL WELLBEING

- Our communities have opportunities to celebrate and explore their heritage, identity and creativity

Go to the SmartyGrants [Answers Bank](#) if you need some ideas about how to frame your response.

What outcomes will you achieve? List one per row. Minimum of one outcome required.

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Activities

What activities are you undertaking to achieve your desired outcomes? List one per row.

You can stipulate one location for each activity. If you have one activity taking place in multiple places, you can either list each location as a separate activity (e.g. Workshop #1; Workshop #2, with a specific location attached to each), or you can list one activity with a generalised location (e.g. "Motueka Library").

How will you achieve your outcomes?	Location	Number of people who will benefit from this activity
One per row. Add more rows if you want to list additional activities.	Where will your activity occur? Leave blank if location is unknown or not relevant. Any, but at least one field is required. Country must be New Zealand	Participants/attendees/members

Budget

* indicates a required field

Who is involved?

How many volunteers in total will be involved in this project?

Must be a number.

On average, how many hours will each volunteer contribute to the project?

If volunteers will contribute different amounts, you can provide a range or the total combined volunteer hours.

What in-kind support has your group received or will receive for this project?

Please list any goods, services or resources that have been donated.

What is the estimated value of this in-kind support?

Must be a dollar amount.

Provide an approximate dollar value for the contributions to give us an understanding of their impact.

Income

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Please list all **income for this project only** in the budget table below, including details of other funding that you have applied for, whether it has been confirmed or not. Do not include this Community Grant application amount as income (as you need to show a deficit).

If you are GST registered - do not include GST in your income.

Income Category	Income (this project Income Amount only)
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Please select from the dropdown list. eg Ticket Sales	List all income received, eg 200 tickets at \$15 per ticket	Must be a dollar amount.	

Expenses

Include all the costs of your project in the table below, select from the category dropdown list then describe the expense in detail (quotes to be attached).

If you are GST registered - do not include GST in your expenses.

Expenditure Category	Expense Detail (this project Expense Amount only)
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Please select from the dropdown list. eg Select: Venue hire / rent	eg 3 days hire of <i>Venue Name</i> at \$100 per day	Must be a dollar amount.

Budget Totals

Total Income Amount

This number/amount is calculated.

Total Expenses Amount

This number/amount is calculated.

Expenditure - Income

This number/amount is calculated.

Requested funding

How much funding are you applying for? *

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Must be a dollar amount.

Please refer to the guidelines to get an idea of average funding allocations.

Supporting Documents

Supporting Documents

Upload supporting documents here, e.g. quotes, supporting letters, financial statement/annual report etc.

Attach a file:

Upload your latest financial statement and any supplementary information.

Declaration and Feedback

*** indicates a required field**

If the application is successful we agree to: *

- ☐ return the Community Grants Acquittal form by the end of June 2027. We understand that failure to do so may mean we will not be eligible for further funding.
- ☐ participate in any funding audit of our organisation or project conducted by or on behalf of Tasman District Council.

Authorised Signatory *

First Name Last Name

The signatory personally represents and warrants that they have the right, power and authority to sign this application form on behalf of the applicant. Electronic signatures are acceptable.

Position (if relevant)

Authorised Signatory

First Name Last Name

The signatory personally represents and warrants that they have the right, power and authority to sign this application form on behalf of the applicant. Electronic signatures are acceptable.

Position (if applicable)

Privacy Statement

Council's Privacy Statement applies to the collection, use and disclosure of personal information. It is contained within our Website Terms of Use.

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[Read our Privacy Statement in our Website Terms of Use](#)

Applicant Feedback

You are nearing the end of the application process. Before you review your application and click the **SUBMIT** button please take a few moments to provide some feedback.

Please indicate how you found the online application process.

☐ Very easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very difficult

How many minutes in total did it take you to complete this application?

Estimate in minutes i.e. 1 hour = 60

Please provide us with your suggestions about any improvements and/or additions to the application process/form that you think we need to consider.