

Waste Minimisation Community Event Grant Application 2026/27

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: [Waste Minimisation Community Events Grant](#).

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

Organisation Name

Name your group: not for profit, school, charitable, voluntary, community group or organisation (not available for individuals)

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	
NZBN	
Entity Name	

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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 *

Must be a New Zealand phone number.

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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

Event Details

Project Title *

Must be no more than 250 characters.

Event Date *

Must be a date.

Must be at least 30 days after today's date to allow time for approval.

Where is your event? *

Must be in Tasman (not Nelson). Please state the venue/location.

Short description of your event *

Word count:

Must be no more than 100 words.

Describe your project in one or two sentences.

How many people do you expect to attend? *

Must be a number.

What type of waste will be generated? *

Describe your waste minimisation initiative? *

Explain in detail how are you preventing generation of waste or minimising waste at your event

Budget

* indicates a required field

Expenses

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List only those expenses the Waste Minimisation Grant would cover.

Expenditure	\$

Expenses Totals

Total Expenditure Amount

This number/amount is calculated.

Funds request

How much funding are you applying for? (maximum \$750 excluding GST) *

Must be a dollar amount and no more than 750.

Supporting Documents

Upload supporting documents here, e.g. quotes/invoices, supporting letters etc.

Attach a file:

Declaration and Feedback

* indicates a required field

If the application is successful we agree to: *

- ☐ return the Waste Minimisation Community Event Acquittal form within 12 months of receiving the grant. 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.

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.

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

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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)

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.