

Application for Waste Levy Fund



1. Download and open this form in your PDF reader (eg Adobe Acrobat). 2. Fill it in and save. 3. Press 'Submit Form'.
Your email application (eg Gmail) will open with the form attached and the email pre-addressed to TCDC. If not, attach the form to an email to customer.services@tcdc.govt.nz. **4. You will receive a reply saying the form has been submitted.**

Applicant details

| | |
|---------------|---------------|
| Full name | |
| Role | |
| Mobile number | Email address |

Organisation details

| |
|----------------------|
| Organisation name |
| Organisation address |

Type of organisation: ☐ Company ☐ Charitable organisation
☐ Other (please specify) _____

| |
|---|
| GST Registration number (if applicable) |
| Charities Services number (if applicable) |
| NZBN (New Zealand Business Number) (if applicable) |

Tell us about your organisation:

| |
|--|
| |
|--|

Project information

Provide a brief explanation about the project you would like funding for:

| | |
|--------------------|------------------|
| Project title | |
| Project start date | Project end date |
| Project location | |

Is this a new or existing project? ☐ New ☐ Existing

Please provide a short description of the project:

Please confirm your project will be delivered in the Thames Coromandel District. ☐ Yes

Minimising waste

What type of project is this?

| | |
|---|--|
| <input type="checkbox"/> Behaviour Change / Education | <input type="checkbox"/> Feasibility Study / Business Case |
| <input type="checkbox"/> Infrastructure / Materials / Equipment | <input type="checkbox"/> Waste Data Collection / Auditing |

Please list the types of materials you plan to divert through your project:

| | | | | | |
|------------------------------------|--|-----------------------------------|------------------------------------|-----------------------------------|--------------------------------|
| <input type="checkbox"/> Ewaste | <input type="checkbox"/> Construction and Demolition | <input type="checkbox"/> Organics | <input type="checkbox"/> Hazardous | <input type="checkbox"/> Plastics | <input type="checkbox"/> Glass |
| <input type="checkbox"/> Recycling | <input type="checkbox"/> Other (please specify): _____ | | | | |

How much waste volume (kg) do you expect to divert from landfill annually throughout the duration of your project, and what would you be doing with these diverted materials?

How was this calculated?

How do you know there is a need for this project in the community?

How many people do you plan to target?

How will you encourage participation?

How does your project support Council's Waste Management and Minimisation Plan?

(Please reference the WMMP objective number)

Expertise

Please list all people from your organisation who will be delivering the project, along with their relevant experience:

Will the project be developed with any other stakeholders?

☐

Yes

☐

No

If yes to the above, please list the other stakeholders and how they will be involved:

Finance

Please provide a breakdown of your itemised project budget, and please attach to this application supporting evidence of all project costs:

Are you requesting the full funding amount from Council?

☐

Yes

☐

No

If no to the above, please advise if there is any other funding as part of this project, separate to what you are requesting from Council's waste levy fund, and if so how much:

How will you be able to measure and report on the success of this project?

Eg. how will you monitor, evaluate and report back to Council on your success?

Please describe how your project will continue after the funding ends:

Recognition of funding

If successful with your application, how would you acknowledge Council's funding contribution?

Health and safety

Please list any health and safety risks associated with your project along with measures you will take to mitigate such risks:

Please note that shortlisted applications may be required to submit a health and safety plan with risks associated to the project.

Declaration

I confirm that the information provided on the application form is true and correct. I consent to TCDC using the information provided on this application for the purpose of assessment of this project.

Signature

Date (DD/MM/YYYY)