



# Section 1 – Applicant Details

Name of Marae: .....

Person applying for grant: .....

Email: .....

(Note: all correspondence relating to your application will be sent to this email address in the first instance)

Phone (day): .....

Postal Address (incl. Post code) .....

.....

Project: .....

.....

.....

Amount requested: \$. .....

Is the Urupā within the South Taranaki District?  Yes  No

Is the Urupā located on:

- Land designated as Māori reservation under Section 338 of the Te Ture Whenua Māori Act 1993 for the purposes of an urupā; or
- Māori freehold land; or
- General freehold land in Māori ownership.

Is the Marae GST registered?  Yes, GST Number .....  No

Contact details (please provide two contacts for your group)

	Contact One	Contact Two
Name	.....	.....
Position	.....	.....
Email	.....	.....
Address	..... .....	..... .....
Phone	.....	.....





# Section 7 - Declaration

- I/we declare that we are a not-for-profit group (*A not-for-profit does not earn profits for its members. All of the money raised or donated is used in pursuing the group's objectives*)
- I/we declare that the information supplied in this application is true and correct.
- I/we undertake that that I/we have obtained the consent of all people involved to provide these details.
- I/we understand that my/our organisation name and brief details about the project may be released to the media or appear in publicity material.
- I/we understand that the South Taranaki District Council is bound by the Local Government Official Information and Meetings Act 1987.

**If this application is successful, I/we agree to:**

- Use funding received through the Urupā Maintenance Fund solely for the project or purposes disclosed in our application.
- Provide a report for each year of funding no later than 30 June. Provide any receipts or invoices which may be requested by the funding administrators.
- Promote or acknowledge the support of the Urupā Maintenance Fund at every opportunity.
- Return funds to the Urupā Maintenance Fund for future allocations, should funding no longer be required, or is surplus or unspent from the agreed funded project.

**Please provide TWO members signatures**

Name:	.....	.....
Signature:	.....	.....
Position in group:	.....	.....
Date:	.....	.....

**All applications will be considered by the South Taranaki District Council's Te Kāhui Matauraura and the Council's Iwi Liaison Manager with support from the Community Funding Advisor.**

<b>2025 Applications Close:</b>	<b>2025 Meeting Dates:</b>
12 January.....	5 February
23 February.....	26 March
6 April.....	7 May
18 May .....	18 June
6 July .....	30 July
17 August .....	10 September
19 October .....	19 November

*Meetings are generally held in the South Taranaki District Council Chambers, Albion Street, Hāwera at 10 am.*

**Post:** Community Funding Advisor  
South Taranaki District Council  
Private Bag 902  
Hāwera, 4640

**Email:** [funding@stdc.govt.nz](mailto:funding@stdc.govt.nz)

**INCOMPLETE APPLICATIONS WILL BE RETURNED TO APPLICANT FOR COMPLETION**

*(please be aware this could delay the consideration/outcome of your application)*