

## Trust Horizon Application Form

### Eligibility

\* indicates a required field

#### Applicants: please note

Before completing this application form, you should have read the Funding Guidelines: [click here](#)

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

This section of the application form is designed to help you, and us, understand if you are eligible for this grant. It's crucial that you complete these questions before any others to ensure you do not waste your time applying for an unsuitable grant.

*Heating* - a building needs to be insulated for the Trust to consider funding for heat pumps or air conditioning systems. Contact us to discuss details if insulation may need to be included in your project application.

*Appliances, air conditioning and heating* - it is important to note the energy efficiency ratings section of the Funding Guidelines before requesting your supplier quotes for this type of equipment

*Community Events* - please note there is maximum funding of up to \$10,000 per event for sound and lighting equipment hire. Please see Funding Guidelines via the link above for more information.

If you have any questions in regards to the eligibility criteria for your or organisation or particular project, please contact **grants@truthorizon.org.nz**

### Confirmation of Eligibility

#### I confirm that the applicant ...

- has read and understands the program guidelines
- the project is energy related
- is able to demonstrate alignment between their project and the aims of this program
- is able to demonstrate impact measures that align to our designed outcomes
- has confirmed the organisation is authorised to undertake the project in accordance with their constitution, rules, trust deed or charter
- is a not-for-profit organisation (includes educational institutions such as schools and kindergartens)
- is incorporated, or an incorporated organisation will act as an umbrella organisation for the purposes of this application
- is located in (and/or supplies services to) Whakatane, Kawerau, Opotiki Districts or Kaingaroa Village
- is able to demonstrate financial viability

# Community Development, Amenities and Events 2026/27

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- does not owe any reports or money to Trust Horizon (formerly Eastern Bay Energy Trust) as a result of previous funding or grants
- has the appropriate type and level of insurance for the activities that are the subject of this grant.

**Please select below: \***

☐ Yes

☐ No

You must confirm that all statements above are true and correct.

## Contact Details

\* indicates a required field

### Applicant Organisation Details

**Applicant organisation name \***

Organisation Name

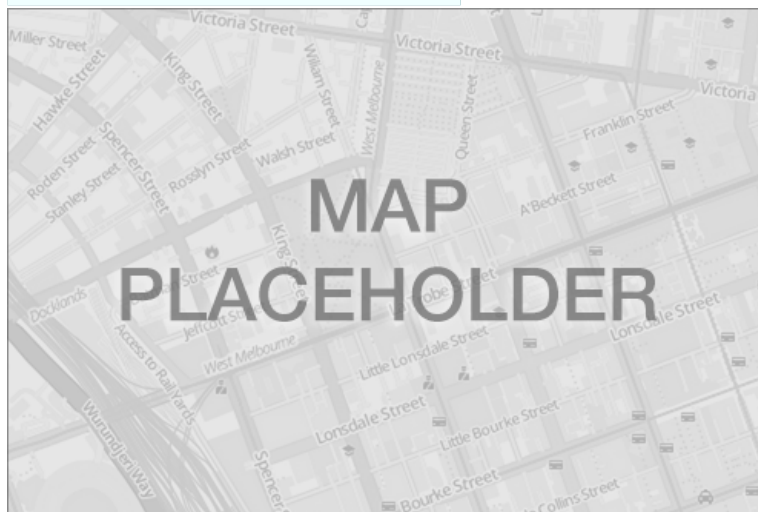
Please use your organisation's full name. Check your spelling and make sure you provide the same name that is listed in official documentation such as with the ABR, ACNC or ATO.

**Department / Branch (if applicable)**

Use this field only if relevant

**Applicant Primary Address**

Address

**Applicant Postal Address**

Address

# Community Development, Amenities and Events 2026/27

## Form Preview

Click on 'can't find my address' to enter PO Box details manually

### Applicant website

Must be a URL

### Primary contact person \*

Title First Name Last Name

This is the person we will correspond with about this grant

### Position held in organisation \*

e.g. Manager, Board Member, Fundraising Coordinator

### Primary phone number \*

### Back-up phone number

### Primary contact person's email address \*

This is the address we will use to correspond with you about this grant.

## Organisation Details

\* indicates a required field

### What is your organisation's Mission

### Applicant NZBN

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                                |
| Registration Date                          |

# Community Development, Amenities and Events 2026/27

## Form Preview

Entity Status  
Entity Type  
Registered Address  
Office Address

Must be formatted correctly.

### Applicant NZ Charity Registration Number (CRN)

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.

### What type of organisation are you? \*

- ☐ District / Regional Council
- ☐ Educational institution (includes pre-schools, schools, universities & higher education providers)
- ☐ Religious or faith-based institution
- ☐ Community group
- ☐ Marae
- ☐ General not-for-profit (i.e. none of the sub-types listed above)
- ☐ Other:

Please choose the option that best applies to your organisation.

### How long has the organisation been operating?

- ☐ More than 20 years
- ☐ 10-20 years
- ☐ 5-10 years
- ☐ 1-5 years
- ☐ Less than 1 year

# Community Development, Amenities and Events 2026/27

## Form Preview

### What is your organisation's annual revenue? \*

- ☐ Less than \$50,000
- ☐ \$50,000 or more, but less than \$250,000
- ☐ \$250,000 or more, but less than \$1 million
- ☐ \$1 million or more, but less than \$10 million
- ☐ \$10 million or more, but less than \$100 million
- ☐ \$100 million or more

Your revenue includes grants, donations, and other fundraising activities, fees for services, sale of goods, interest, royalties and in-kind donations that have been included in your accounts as 'revenue'. The Australian Charities and Not-for-profits Commission (ACNC) has more detailed information here: [www.acnc.gov.au/ACNC/Manage/Reporting/SizeRevenue/ACNC/Report/SizeRevenue.aspx](http://www.acnc.gov.au/ACNC/Manage/Reporting/SizeRevenue/ACNC/Report/SizeRevenue.aspx)

### Is your Organisation GST registered? \*

- ☐ Yes
- ☐ No

### Organisation Bank Account \*

Must be between 18 and 19 characters.

Please enter your bank account details in the following format: 00-0000-00000000-00

Any funding payment approved will be made to your organisation, so that all grant funding can be shown on your annual accounts. **You will need to pay the contractor.**

### Please upload a bank deposit slip to verify the account details \*

Attach a file:

### What is your organisation's legal structure?

- ☐ District / Regional Council
- ☐ Incorporated Society
- ☐ Unincorporated
- ☐ Limited Liability Company
- ☐ Trust
- ☐ Other:

If your organisation is unincorporated it must have an auspice organisation

## Umbrella Organisation

\* indicates a required field

### Is another or by another organisation for the purposes of this grant?

- ☐ No

Unincorporated organisations applying for a grant must be auspiced by an incorporated organisation. If you do not have an auspice you should not apply for this grant.

# Community Development, Amenities and Events 2026/27

## Form Preview

### Umbrella Organisation Details

**Name of auspice or partner organisation \***

Organisation Name

**Umbrella organisation's website**

Must be a URL

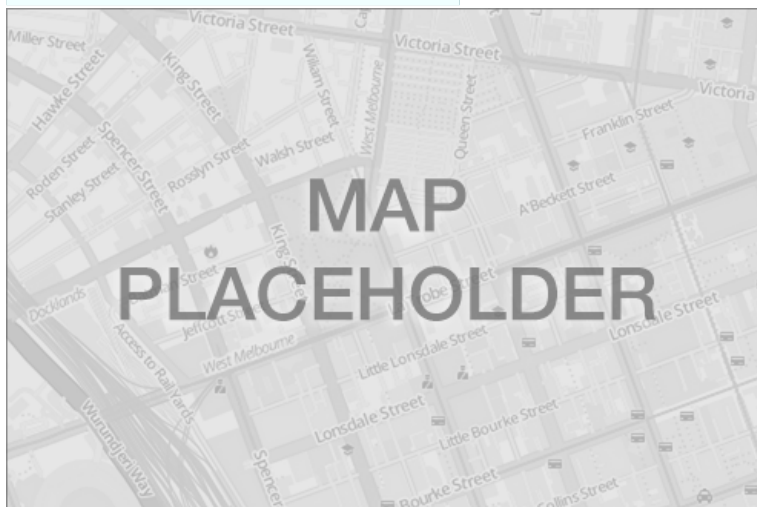
**Primary contact person at Umbrella organisation \***

Organisation Name

We may contact this person to verify that this auspicings arrangement is valid and current.

**Umbrella Org Primary Address \***

Address

Address Line 1, Suburb/Town, State/Province, Postcode, and Country are required.

**Umbrella Org Postal Address**

Address

**Position held in organisation**

e.g. Manager, CEO

**Contact person's primary phone number \***

# Community Development, Amenities and Events 2026/27

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**Contact person's back-up phone number**

**Contact person's email address \***

Must be an email address

**Please attach a letter from the auspice or partner organisation confirming this arrangement is valid and current \***

Attach a file:

Letter must be signed by an appropriately authorised person (e.g. manager, CEO, Board Chair) and must include, name, position, signature and date.

## Project Details

\* indicates a required field

**Project title:**

Provide a name for your project/program/initiative. Your title should be short but descriptive

**Project address or location:**

**What are the primary areas of focus for this project/program?**

No more than 5 choices may be selected.

You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

**Anticipated start date**

**Anticipated end date**

If unknown, provide your best guess or leave blank If unknown, provide your best guess or leave blank

**Please provide a short summary of your initiative**

# Community Development, Amenities and Events 2026/27

## Form Preview

Be descriptive, but succinct. Include a brief summary of who this project is for (i.e. beneficiaries), what you will do (i.e. the activities you will perform), and what effects you expect to result from your activities (outcomes).

### Rationale / Theory of Change: What is the need and how will you address it?

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.

### Alignment - How will your initiative help Trust Horizon achieve our goals?

Please consult the program guidelines for more information about our vision and mission - see <https://www.trusthorizon.org.nz/about-us>

### Please tell us about the outcomes you expect to result from this initiative.

Outcomes are the changes you expect to occur for the beneficiaries of your initiative. 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)

Immediate outcomes occur directly following an activity (e.g. within 1 month); intermediate outcomes are those that fall between the immediate and long-term (e.g. between 1 month and 2 years); and long-term outcomes are those we expect to see years later (e.g. 2, 5, 10 or 50 years after the activity).

We also want to learn more about the beneficiary groups you think your initiative will affect (**Primary** and **Indirect**), who you will work through to reach those groups or achieve your outcomes (**Intermediaries**), and how you propose to gauge whether your anticipated outcomes have been achieved - what you will measure and how (**indicators**).

*An example of outcomes for the installation of insulation and heat pumps:*

#### Outcomes

#### Timeframe

#### Indicator

#### Verification

Improved heating and comfort

Immediate

Room temperature at healthy levels

Positive feedback on comfort level received from users

# Community Development, Amenities and Events 2026/27

## Form Preview

Energy efficiency

Intermediate

Power bill costs

Reduced cost of power compared to previous winter months

If you need more help understanding what outcomes are, read the materials at [www.ourcommunity.com.au/evaluation](http://www.ourcommunity.com.au/evaluation)

**List your initiative's anticipated outcomes and in the following table. Leave blank any fields that do not apply to your initiative.**

| Anticipated Outcomes                                                                                     | Timeframe             | Indicator                                  | Verification Method                   |
|----------------------------------------------------------------------------------------------------------|-----------------------|--------------------------------------------|---------------------------------------|
| Outcomes are the changes that you expect to occur as a result of your initiative. See information above. | See description above | What you will use to measure this outcome? | e.g. survey; interviews; focus groups |
|                                                                                                          |                       |                                            |                                       |
|                                                                                                          |                       |                                            |                                       |
|                                                                                                          |                       |                                            |                                       |

## Primary Beneficiaries - Section

**Who are the primary beneficiaries of this project/program?**

No more than 5 choices may be selected.

Please choose only the group/s that are at the very core of this project/program

**Please list any indirect beneficiaries you anticipate will or may be affected by your initiative.**

**Indirect beneficiaries:**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Indirect beneficiaries are those who may not be targeted by your initiative but are nonetheless expected to be affected by it. For example, a country sports program might be expected to improve the health of the participants ('rural children and youth'), but also to contribute to strengthened community cohesion and capacity building through greater involvement in sports clubs ('rural adults'). You may add extra rows if required. |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                  |

# Community Development, Amenities and Events 2026/27

## Form Preview

### Please list any intermediaries you will work through or with to reach your beneficiaries and/or achieve your outcomes.

Intermediaries are the service providers who have provided you with quotes or are providing expertise to complete your project. Examples of how they can be listed are:

- electrical contractors
- air conditioning or refrigeration contractors
- lighting specialists
- STEM education equipment supplier

### Intermediaries:

|                                                                                                                                                                                        |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| In order to induce changes as a result of your project or in your target group, you may need to work through one or more layers of intermediaries. You may add extra rows if required. |
|                                                                                                                                                                                        |
|                                                                                                                                                                                        |
|                                                                                                                                                                                        |

### What outputs are you expecting to produce through this initiative?

Outputs are the immediate, obvious, and (usually) countable changes a project/program generates. Examples would include the number and type of products to be installed, number of attendees expected at a community event, the number of volunteers to be engaged.

*Using the example above of installing insulation and heat pumps, the outputs would be:*

#### Number

#### Who or What

#### Service / Product / Activity

#### Timeframe

2

Heat pumps

Installation

One-off install

260m2

Moisture barrier

Installation

One-off install

260m2

R.18 blanket underfloor insulation

Installation

One-off install

# Community Development, Amenities and Events 2026/27

## Form Preview

**List your initiative's intended outputs, including approximate numbers (if possible), in the following table. Leave blank any fields that do not apply to your initiative.**

| Number                                   | Who or What                                              | Service / Activity                                              | Timeframe                                                |
|------------------------------------------|----------------------------------------------------------|-----------------------------------------------------------------|----------------------------------------------------------|
| (Approximate, or leave blank if unknown) | e.g. type of product or appliance, community event guest | e.g. electrical installation, sound and lighting equipment hire | e.g. one-off, per month, per annum, over life of program |
|                                          |                                                          |                                                                 |                                                          |
|                                          |                                                          |                                                                 |                                                          |
|                                          |                                                          |                                                                 |                                                          |

**Does this initiative have community support? In particular, do the beneficiary and/or geographic communities affected by this project/program support the activities you are proposing?**

☐ Yes
 ☐ No
 ☐ Don't know
 ☐ Not Applicable

Evidence of community support is generally highly regarded as projects with community buy-in tend to be more successful.

**What evidence do you have that this project/program has community support?**

**Please upload letters of support (if available/relevant)**

Attach a file:

A maximum of 5 files can be attached

**What are the major steps / stages (i.e. milestones) involved in delivering your initiative?**

| Milestone                                   | Start Date (if known)                                                                                 | Finish Date (if known)                                                                                | Location (if relevant)                                                                    | Notes                             |
|---------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|-----------------------------------|
| e.g. planning; major activities; evaluation | Provide approximate date or leave blank if unknown or dependent on unknown factors<br>Must be a date. | Provide approximate date or leave blank if unknown or dependent on unknown factors<br>Must be a date. | (e.g. add address, suburb, region if known; otherwise type 'unknown' or 'not applicable') | Add explanatory notes if required |
|                                             |                                                                                                       |                                                                                                       |                                                                                           |                                   |
|                                             |                                                                                                       |                                                                                                       |                                                                                           |                                   |
|                                             |                                                                                                       |                                                                                                       |                                                                                           |                                   |

# Community Development, Amenities and Events 2026/27

## Form Preview

**Is the project for building improvements?**

- ☐ Yes
- ☐ No

Improvement examples for a building include any electrical work/upgrades, lighting, insulation, heating and eligible kitchen appliances

**Does the organisation own the building? \***

- ☐ Yes
- ☐ No
- ☐ Other:

If "No" please confirm term of lease/renewal periods and upload a copy of the signed lease in the supporting documents section later in the application form

**How often is the building/facilities used by your organisation or other members of the community?**

- ☐ Daily
- ☐ Several times per week
- ☐ Once per week
- ☐ Fortnightly
- ☐ Monthly
- ☐ Other:

**Please provide a breakdown of who uses the building/facilities and help us gain a better understanding of who the project is impacting**

| User Group Name | How often does this group use the facilities? | What is their main activity? | Number of people in user group per annum | Number of other visitors per annum |
|-----------------|-----------------------------------------------|------------------------------|------------------------------------------|------------------------------------|
|-----------------|-----------------------------------------------|------------------------------|------------------------------------------|------------------------------------|

|  |  |  |                   |                   |
|--|--|--|-------------------|-------------------|
|  |  |  | Must be a number. | Must be a number. |
|  |  |  |                   |                   |
|  |  |  |                   |                   |
|  |  |  |                   |                   |
|  |  |  |                   |                   |
|  |  |  |                   |                   |

**Total all users and visitors per annum**

Must be a number.

# Community Development, Amenities and Events 2026/27

## Form Preview

**Please provide a breakdown of who may be impacted by your project to help us gain a better understanding of what the initiatives involved may provide to the community**

| User Group Name | Number of people  | Main Activity | How often - number of days per annum? |
|-----------------|-------------------|---------------|---------------------------------------|
|                 | Must be a number. |               | Must be a number.                     |
|                 |                   |               |                                       |
|                 |                   |               |                                       |
|                 |                   |               |                                       |
|                 |                   |               |                                       |
|                 |                   |               |                                       |

**Total number of people impacted**

Must be a number.

**Does the project have the necessary consents?**

- ☐ Not applicable  
☐ Applied for  
☐ Granted  
☐ Other:

## Inputs (Budget)

**Total Amount Requested**

What is the total financial support you are requesting in this application? Please use the excluding GST value unless your organisation is not registered for GST.

**Total Project/Program Cost**

What is the total budgeted cost (dollars) of your project? Please use the excluding GST value unless your organisation is not registered for GST.

**Budget (GST exclusive\*)**

Please outline your project budget in the income and expenditure tables below, including details of other funding that you have applied for, whether it has been confirmed or not.

**\* All amounts should be GST exclusive, however, if your organisation is not GST registered then please use GST inclusive amounts.**

# Community Development, Amenities and Events 2026/27

## Form Preview

Provide clear descriptions for each budget item in the 'Income' and 'Expenditure' columns, Examples of income could include 'council community grant', 'trivia fundraising night', 'company X sponsorship'.

Use the 'Notes' column for any additional information you think we should be aware of.

*Income Description line example for the table below:* Grant requested / Philanthropic Grant / Unconfirmed / \$25,000 (total amount requested) / from Trust Horizon

**Trust Horizon requires two quotes for each of the items you are applying for funding towards. All quotes must be valid for 30 days from submission of your application.**

Costs you are applying for in this application should be broken down into main categories by line as an Expenditure Description, e.g. Electrical work, Insulation, Heating, Appliances etc. Other project costs which are not energy related and are not eligible for Trust Horizon funding can be totalled and added as one expenditure line item..

Your budget **MUST** balance (TOTAL INCOME AMOUNT = TOTAL EXPENDITURE AMOUNT). Please **do not add commas** to figures – e.g. type \$1000 not \$1,000 – this will ensure your figures for each table total correctly.

**Income Description** **Income Type** **Confirmed Funding?** **Income Amount (\$)** **Notes**

|  |  |  |    |  |
|--|--|--|----|--|
|  |  |  | \$ |  |
|  |  |  | \$ |  |
|  |  |  | \$ |  |
|  |  |  | \$ |  |

**Expenditure Description** **Expenditure Type** **Expenditure Amount (\$)** **Notes**

|  |  |    |  |
|--|--|----|--|
|  |  | \$ |  |
|  |  | \$ |  |
|  |  | \$ |  |
|  |  | \$ |  |

## Budget Totals

**Total Income Amount**

\$

This number/amount is calculated.

**Total Expenditure Amount**

\$

This number/amount is calculated.

**Income - Expenditure**

This number/amount is calculated.

# Community Development, Amenities and Events 2026/27

## Form Preview

**Please attach quotes for all expenditure (cost) items - at least 2 valid quotes are required and please ensure both providers are using the same project scope.**

Attach a file:

Please contact us if your project involves particularly specialist equipment or a single NZ distributor where two quotes may be difficult to access.

**If you would like to submit any further supporting information about your project, please attach it here, e.g. a detailed project scope, supporting report(s), cover letter, photos or video, copy of a signed lease document.**

**Please also check the [Funding Guidelines](#) checklist for additional information required if:**

- your project is a district council owned property
- a school or kura
- affiliated with or part of a national organisation
- a building of historical importance.

Attach a file:

**What other inputs will you need in order Confirmed?  
to successfully carry out this project?**

|                                                                                                                                                                     |  |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Non-financial inputs could include staff/volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, and other types of support. |  |
|                                                                                                                                                                     |  |
|                                                                                                                                                                     |  |
|                                                                                                                                                                     |  |

## Applicant Capacity

\* indicates a required field

**Now that we know about your project/program, we want to find out more about your organisation's ability to undertake the work you propose. Please provide some information about your organisation that will give us confidence that you can complete the work you've described in this application.**

# Community Development, Amenities and Events 2026/27

## Form Preview

Include in this section information about your strategies for providing the inputs (money, staff/ volunteers time/expertise, equipment, facilities, pro bono or in-kind contributions, advocacy, etc.) and how you will complete this project/program within the proposed timelines. Provide information also about any past work that may demonstrate your organisation's capacity to undertake this work. Provide links to further explanatory material if available/relevant.

### **Please attach a copy of your most recent Annual Report or a full set of Financial Statements**

If you do not produce an annual report, please provide us with your most recent financial statements (may include a Profit and Loss Statement / Statement of Financial Performance and a Balance Sheet / Statement of Financial Position) and a copy of the latest bank statement for each account including investments.

### **Upload files \***

Attach a file:

Please clearly name each document before uploading, e.g. Performance Report 2021, Financial Statements 2021, Bank Statement Current Account

**If your organisation (or parent) currently has a reasonable level of funds (e.g. cash and term deposit) in relation to the grant requested, please advise what future projects or plans those funds are reserved for**

Does not apply to District/Regional Council applications

**Is this project part of the Council's current Long Term Plan (LTP)?**

- ☐ Yes  
☐ No

**Please advise the budgeted amount if the project is included in the LTP or if not, please provide background on its status within Council planning**

## Certification and Feedback

\* indicates a required field

Certification

# Community Development, Amenities and Events 2026/27

## Form Preview

This section must be completed by an appropriately authorised person on behalf of the applicant organisation (may be different to the contact person listed earlier in this application form).

**I certify that to the best of my knowledge the statements made within this application are true and correct, and I understand that if the applicant organisation is approved for this grant, we will be required to accept the terms and conditions of the grant as outlined in the letter of approval.**

**I agree \***

☐ Yes

☐ No

**Name of authorised person \***

Title

First Name

Last Name

Must be a senior staff member, board member or appropriately authorised volunteer

**Position \***

Position held in applicant organisation (e.g. CEO, Treasurer)

**Contact phone number \***

We may contact you to verify that this application is authorised by the applicant organisation

**Contact Email \***

Must be an email address.

**Date \***

Must be a date

## 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.

**How did you hear about Trust Horizon's funding support? \***

Other:

Please make your selection from the dropdown list or type a new option in the "Other" field.

**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 (use numbers only, no text) i.e. 1 hour = 60

# Community Development, Amenities and Events 2026/27

## Form Preview

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