Waste Levy Fund for Seed Funding

Expression of Interest (EOI) form

***Please read the*** [***Fund Criteria & Application Guidelines***](https://www.kapiticoast.govt.nz/media/37976/seed-funding-criteria-and-application-guidelines-2020-21.pdf) ***before completing this form.***

**1. Group/business/organisation:**

Click here to enter text.

**2. Contact:**

Full name:

Click here to enter text.

Role within business/organisation:

Click here to enter text.

Address:

Click here to enter text.

Phone numbers

Mobile: Click here to enter text.

Secondary number: Click here to enter text.

Email:

Click here to enter text.

How did you hear about the Waste Reduction Grant(s)?

Click here to enter text.

1. **Project description**

Briefly describe the proposed project:

Click here to enter text.

How much waste reduction will your initiative achieve (rough estimate if possible)?

Click here to enter text.

How will your project benefit our local and/or regional economy, the wider Kāpiti community and the environment?

Click here to enter text.

1. **Priority funding areas**

Indicate what waste stream(s) or areas your project is targetting:

[ ]  Organic Waste

[ ]  Construction and Demolition Waste

[ ]  Projects that fill a gap within current waste services in Kāpiti

[ ]  Other: Click here to enter text.

1. **Funding details**

A funding pool of $20,000 is available for Seed Funding projects 2020/21. This fund pool is shared between the Seed Funding and Business Waste Reduction categories.

Please note a full business case and detailed project budget will be required if your project is selected to go through to the next application stage.

Estimate of required Waste Levy Fund funding ($): Click here to enter text.

Are you planning to access any funds from other sources for this initiative, e.g. self-funding or grants / subsidies from other organisations?

Click here to enter text.

How will your project become self-sustaining post Council or other subsidy?

Click here to enter text.

1. **Declaration**

By typing my name in the box below, I certify that the information on this form is correct.

I understand that if the information is not correct, then the Council may refuse to consider the application, require immediate repayment of any grant, cancel any other entitlement granted and/or enforce its rights.

Every applicant must use grant monies only for the purpose for which they are granted and account for them.  If that is not done, any grant monies paid must be repaid to the Council on demand. If the actual cost of purchased equipment is lower than the initial quote, the difference will be repaid to the Council at the same time that the purchase price is paid. Proof-of-purchase will be forwarded to the Council.

I understand that any personal information collected in relation to this application will be treated in accordance with the Council's Privacy Statement and the Privacy Act 1993.

If this application includes personal information, I have obtained the consent of all persons concerned to provide it.

Please ensure you have read and understood this statement prior to submitting your application.

Full name: Enter full name to accept this declaration.

Date: Click here to enter the date.

Send your Expression of Interest, to be received by 5pm, 20 October 2020;

electronically to: waste@kapiticoast.govt.nz

by post to: Waste Levy Fund

C/- Waste Minimisation Officer/Advisor

Kāpiti Coast District Council

Private Bag 60601

Paraparaumu 5254

deliver to: Waste Minimisation Officer/Advisor

Kāpiti Coast District Council

175 Rimu Road

 Paraparaumu