Introduction and eligibility

* indicates a required field

Welcome to the application form for the Queenstown Lakes District Council (QLDC) Waste Minimisation Community Fund.

The purpose of local government is to play a broad role in promoting the social, economic, environmental, and cultural wellbeing of communities. The Waste Minimisation Community Fund provides QLDC with the ability to support projects or activities that improve the wellbeing of our community as well as advance waste minimisation goals for our district.

Please familiarise yourself with the <u>Waste Minimisation Community Fund Guidelines</u> before beginning your application. If you have any questions, or want to check that your idea meets our goals and criteria before applying, please email <u>zerowaste@gldc.govt.nz</u>

We can only accept complete applications, so please answer all mandatory questions.

Please label attachments clearly with 'Document Name - Project Title - Application submission number'.

To support your application, you may wish to include:

- Letters of support from key stakeholders or partners.
- Evidence of previous project or organisation successes e.g. photos, survey data, testimonials from volunteers.

To be eligible to apply for support from the QLDC Waste Minimisation Community Fund, the project must meet the following criteria:

- projects must take place within the Queenstown Lakes district and benefit the local community. You can view the boundaries here.
- for request over \$1,000 the applicant must be a legal entity such as a trust, company, or incorporated society, and must be able to provide evidence of this status if requested.
- for requests under \$1,000 applicants can be an unformed group or individual.
- the applicant must have no outstanding debt owing to QLDC.
- the applicant must comply with all QLDC regulatory and statutory requirements relating to the delivery of their services or projects, including obtaining all necessary permits and consents.
- the applicant must fully declare any additional council or local board funding, grant or koha/donation received for the project and must specify additional funding from their own or other resources, and/or in kind.
- the applicant must not have breached previous funding and legislative agreements with the council, including reporting criteria.
- the applicant must deliver services or projects within the timeframe of any approved funding, in alignment with the QLDC financial year (1 July to 30 June).

Confirmation of eligibility

I confirm that the applicant... • has read and understands the QLDC Waste Minimisation Community Fund guidelines and eligibility criteria Please select below: * Yes O No You must confirm that all statements above are true and correct. For further information about eligibility criteria, refer to FAQs at https://www.qldc.govt.nz/services/rubbish-recycling/wasteminimisation-community-fund/ Applicant contact details * indicates a required field Applicant name * Organisation Name If applying as an organisation, please use the organisation's official full name. **Applicant primary address** Address Applicant primary phone number * Applicant primary email * **Applicant website**

Key contact

Must be a URL.

Social media website

Must be a URL.

Please make sure the contact person listed is the best person for us to communicate with about this application. This person must have approval to answer questions about the application.

Key cont Title	t act name * First Name	Last Name		
Key cont	tact role *			
Key cont	tact mobile phor	ne number *		
Key cont	tact email *			
Conflict	of interest			
considere conflict of	ed for grant fundin	g. However, applice ption of a conflict	of interest) in their ap	of QLDC can still be hould note any possible plication, to ensure any
	u or your organi s or employees?		onflict of interest wit	h QLDC elected
Describ	e conflict of ir	nterest and m	itigation	
If yes, pl	lease describe t	his conflict of in	terest and how this v	will be mitigated *
Tell us	about you			
* indicate	s a required field			
Organis	sational struct	ure		
or incorp applicab O Charit O Incorp O Limite O Sole p	oorated society, le, please identicable trust porated society ed liability compan	and must be ab	ist be a legal entity a le to provide eviden us of your organisat	
Where is	s your organisat	ion based? *		

 Local (in the Queenstown Lakes District) National International In the case you are an individual, please state where you are based.
How long have you or your organisation been established in the Queenstown Lakes district? * Less than one year ago 1-5 years More than five years
In the last financial year, what was your organisation's total annual income (revenue)? * Less than \$10,000 \$10,000 to less than \$30,000 \$30,000 to less than \$50,000 \$50,000 to less than \$100,000 More than \$100,000 Note: Only applicable for organisations and not individuals.
Does your organisation have an New Zealand Business Number (NZBN) or Charities Registration Number (CRN)? * ○ Yes ○ No
Applicant NZBN - If you have a NZBN please add below, otherwise leave this field blank
Applicant NZBN - If you have a NZBN please add below, otherwise leave this field blank The NZBN provided will be used to look up the following information. Click Lookup above to check that you have entered the NZBN correctly.
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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.		I
Tell us about yourself or your organisa and experience you have to carry out y	tion and what relevar	nt skills, resources,
Word count: Must be no more than 200 words. We may use t Council or online and in media releases if your fu		
Are you working with other stakeholde ○ Yes	ers to deliver this proj	ect? *
Stakeholder relevant experience	and capability	
Please outline the stakeholders' releva	nt skills, resources, a	nd experience. *
Word count: Must be no more than 200 words.		
Outline the roles and responsibilities of	f all involved in your	project. *
Word count: Must be no more than 500 words.		

Tell us about your project

* indicates a required field

Category

Select the category under which you are applying: *

- O Category A Commercial Waste Minimisation.
- O Category B Community Action and Behaviour Change.

Category A: Supporting commercial innovations that minimise waste and maximise resource recovery. | Category B: Supporting projects that minimise waste, encourage community participation, and create enduring change in behaviour.

Project title

What is the name of your project or initiative? *

We may use this title in presenting your application to Council or online and in media releases if your funding application is successful.

Strategic alignment

Identify which of these strategic objectives your project will achieve: *

- ☐ Waste Reduction Reducing waste at source
- ☐ Resource Recovery Diverting waste from landfill

You may select more than one option.

Please identify which level of the waste hierarchy your project aligns with: *

- ☐ Rethink redesigning systems so that less material goes to waste.
- ☐ Reduce using less resources and consuming products only if you need them.
- $\hfill\square$ Reuse preserving the value, usefulness and function of a product so it can be used again.
- ☐ Repair fixing or restoring items that are damaged or malfunctioning, with the aim of extending their lifespan.
- \square Recycle salvaging and separating used materials and processing them into new products.
- ☐ Compost controlled decomposition of organic materials such as food scraps or garden waste into nutrient-rich soil amendment.

You may select more than one option.

Outcomes

The QLDC Community Outcomes (<u>Vision Beyond 2050</u>) presents the aspirations of Queenstown Lakes communities. These are supported by our wellbeing framework and delivered through our strategic priorities and will be considered as part of the assessment of your application.

The Queenstown Lakes Wellbeing Framework includes:

PEOPLE

- **Health and fulfilled people:** People live safe, meaningful lives with good physical and mental health.
- A good standard of living: People have good livelihoods, with access to quality employment and education. Individuals, families and whānau are able to prosper and support themselves.

PLACE

- A healthy natural environment: The mauri of the taiao is respected and preserved. Air, water, land, and biodiversity is healthy and its natural beauty endures.
- An enabling built environment: Spaces, connections, and infrastructure empower people to live well

COMMUNITY

- **Connected communities:** Communities and networks are cohesive and provide opportunities for positive social interaction and support.
- **Belonging & Identity:** People of all backgrounds feel a sense of belonging. People are able to practice and share culture and traditions.
- Participation & Governance: Formal and informal governing bodies function effectively through active and diverse engagement.

Outcomes are the changes you expect to occur for those that benefit from your event (people, place or community). 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).

The table below requires information about the main outcomes your project aims to deliver and how these contribute to the wellbeing framework. Your application requires at least one outcome to be listed, with a maximum of three outcomes to be provided.

How will your project contribute to this

Successful applicants will be asked to report on how they achieved these outcomes.

Which of the wellbeing outcomes does

your project contrib	ute to?	wellbeing outcome?	
to? If multiple apply pick		Please explain how your contribute to ours.	intended outcome helps
No more than 1 choice m	ay be selected.		
Project details	aanatawa Lakaa Bist		
☐ Whole Queenstown	eenstown Lakes Dist	□ Jacks Point	☐ Quail Rise
Lakes District	Bay	in jacks Follic	□ Quali Nise
☐ Whole Wānaka/Upper Clutha area	Frankton	☐ Kelvin Heights	☐ Queenstown

☐ Whole Whakatipu area	☐ Gibbston	☐ Kingston	☐ Shotover Country
☐ Arrowtown	☐ Glenorchy	☐ Lake Hayes	☐ Sunshine Bay - Fernhill
☐ Albert Town☐ Arthurs Point	☐ Hanleys Farm☐ Hāwea	□ Lake Hayes Estate□ Luggate	
☐ Cardrona Select all locations that a benefit the local commu		☐ Makarora e place within the Queenstor	wn Lakes District and
Briefly summarise y	our project, includi	ng its overall goal. *	
Word count: Must be no more than 15	50 words		
	tion in presenting your a	pplication to Council and m	edia releases if your
Outline the waste c	hallenge(s) you war	nt to address through	this project. *
Word count:			
Must be no more than 15	ou words.		
Describe how your identified above *	project will provide	a solution to the wast	e challenge(s)
identified above			
Word count:			
	ntion the expected projec	ct outcome(s), the activities re the success of the outcon	
Collaboration and	d participation		
	ve participation from t g lasting shifts in beha	the community can play a vior.	a crucial role in shaping
	be how your project gh collaborative par	t seeks to respond to i rtnerships.	ssues and
	·		
Word count:	20 words		

Explain how your project aims to foster engagement within the community and/or instigate lasting shifts in behavior. $\mbox{\ensuremath{^{\ast}}}$

\A/		
Word count:		
Must be no more than 200 words		

How many people do you anticipate will directly benefit from your project? *

Must be a number.

People who directly benefit from the service or project are those that use the service or participate in the project. e.g. volunteers planting trees or young people using the service.

Risks and mitigation

Plea	se identif	fy any pote	ential risk	s and mit	igations. ³	k

Word count:

These are risks that may affect the completion and success of your project. Please outline the mitigations you will put in place to address these.

Tell us about your project continued

Your metrics - measuring success

A metric is a quantifiable measure used to track and assess the performance, progress, or success of a project or initiative.

There are two types of metrics.

Outcome Metric: An outcome metric measures the overall impact or result achieved as a result of the project or initiative. Outcome metrics typically answer the question: "What change or impact did the project achieve?"

Activity Metric: An activity metric, on the other hand, measures specific actions or tasks undertaken as part of the project to achieve the desired outcome. These metrics focus on the activities carried out rather than the ultimate impact. Activity metrics typically answer the question: "What activities or steps were taken to implement the project?"

Metrics work best when they:

- Are quantifiable/numeric
- Are clearly defined and succinct
- Contain all the context needed to gauge and compare the result (e.g. unit [e.g. cm, metres, people, people-days, %, etc]; direction of change [increase; decrease; etc.]; timeframe [e.g. per month; per year; etc])
- Have been tested, and/or are in common use, and/or are commonly understood as a relevant and useful indicator of performance in a particular arena
- Are used sparingly you are much better off to ""ask one good question and answer it reliably"" than try to track many things at once

• Relate to a clearly articulated outcome or activity.

FOR EXAMPLE:

Metric TypeMetricTargetCollection method

Outcome metricReduction in single-use coffee cup consumption.50% decrease in coffee cup waste disposed of in landfills.Conduct waste audits before and after implementing the project.

Activity metricImplement a reusable cup incentive program, offering a discount to customers who bring their own cups.1000 single-use cups saved. This could be done through a point-of-sale system that records when customers receive a discount for using their own cups or through manual counting and recording by staff members.

Metric type	Metric	Target	Collection method
'Activity metrics' measure an activity (e.g. 'Number of visitors'). 'Outcome metrics' measure the change experienced by a population group (e.g. 'Number of young people gaining employment').	One per row. Add more rows if you want to list additional metrics.	Identify a target for the metric you have chosen - an estimated total for your project. Must be a number.	How will you collect and verify the data? E.g. survey, interviews/case studies, focus groups, observation/estimation, audits etc.

Milestones

Milestones are significant points or achievements that mark progress towards completing the overall project. They represent key moments in the project timeline where specific tasks or objectives are completed, or important decisions are made.

For example, in a single-use coffee cup waste minimisation project, milestones could include things like:

- 1.Launching a reusable cup incentive program at participating coffee shops.
- 2.Reaching a certain percentage reduction in single-use cup usage.
- 3.Conducting a community awareness campaign about the environmental impact of single-use cups.

Milestone	Start date	End date	Explanatory notes
One per row. e.g. Planning; recruitment; evaluation. Add more rows if you want to list additional milestones.	unknown or not relevant.		Add notes if you need to provide more context.
	<u> </u>		

Project budget

* indicates a required field

What is the total cost of your project (ex	velucive of CST)
What is the total cost of your project (e)	cciusive of GST)
Must be a dollar amount.	
What is the total amount of funding requestions (exclusive of GST)	uested from this WMCF application
\$	
Must be a dollar amount.	
Full project budget	
Please submit a full project budget listing all using the Project Budget template found HERE.	
Please clearly identify which expenses a your budget.	re to be funded by the QLDC WMCF in
Please upload your full project budget: * Attach a file:	k
Please label your budget document clearly with 'D submission number'.	ocument Name – Project Title – Application
Other project funders	
16	

If applicable, please list any other funders you have applied to (or plan to apply to) for project funding. Include how much funding you have requested and whether you have been successful in those applications.

Funder	Amount requested	Funding status
	Must be a dollar amount.	
	\$	○ Application submitted ○ Yet to apply ○ Funding approved
	\$	○ Application submitted ○ Yet to apply ○ Funding approved
	\$ 	○ Application submitted ○ Yet to apply ○ Funding approved

Previous funding

Have you or your organisation	on/group previously	received funding	g from the QLDC
WMCF? *			

0	Yes

O No

Previous funding details

Project name	Year	Amount
	Formatted as YYYY (e.g., 2024)	Must be a dollar amount.
		\$
		\$
		\$

Certification and feedback

* indicates a required field

Supporting documents

Attachments to include with your application

Here are a list of attachments you must include with this application. Please label all documents clearly with the name of your community organisation and upload these.

All applications must include:

• Project budget. You should have attached the project budget on the 'About your project funding request' page.

Other optional attachments you may like to submit to support your application:

- Strategic plan / business plan
- Letters of support from key stakeholders or partners
- Evidence of previous project or organisation successes e.g. photos, survey data, testimonials from volunteers.

Please label each document clearly with 'Document Name - Project Title - Application submission number'.

Attach a file:			

Certification

This section confirms that you have authorisation to submit this application on behalf of the applicant.

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 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 *	O Yes		O NO
Name of authorised person *	Title	First Name	Last Name

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	
	application process. Before you review your application and se take a few moments to provide some feedback.
As this is the first funding appli any suggestions that could imp	ication round to use the new platform, we would appreciate prove your experience.
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○ Very easy ○ Easy	und the online application process: O Neutral O Difficult O Very difficult
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