

## Te Putea Mahere Rawa a Hapū/lwi Hapū/lwi Resource Management Plan Fund

## Pepa Tono Application Form

Office Use only
File No
Date received:
Further info required: Yes/No
Info requested on:(Date)
Details:

1	This application is for:					
		The development of a new hapū/iwi resource management planning document.				
	☐ Updating or reviewing an existing document (please name existing document below).					
	☐ The development of a plan to record culturally significant sites, within your resource management plan.					
Name and contact details of hapū/iwi:						
			Email:			
			Phone:			
			Mobile:			
			Fax:			
3	Contact details of key people involved in this project (use more paper if necessary)					
	Nan	ne:	Name:			
	Add	ress:	Address:			
	Pho	ne (daytime):	Phone (daytime):			
	Eve	ning:	Evening:			
	Ema	ail:	Email:			
4	prev	ude their role in the project, skills, qualifications and				

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Nan	Name of Iwi Authority:					
IVAI						
Det	Details of authorised iwi representative:					
Nan	ne:	Designation:(Chairperson, Trustee, Authorised Signatory etc.)				
Sigı	nature:	Date:				
	Evidence to show that the plan being developed has the approval from a wide representation o the hapū/iwi. Please provide:					
	Copy of minutes of meeting in which	the plan development was mandated.				
	Letter of confirmation from the chairp	erson of the hapū/iwi.				
	Other form of confirmation (please pr	ovide detail below):				
	<b>Project description</b> (Describe the purpose of the plan: proposed content, goals, objectives and desired outcomes):					
Wh	at will be the name of the hapū/iwi pla					
		anning document?				
What Des	at is the proposed life of the plan?	nning document?  (boundaries) and statutory acknowledgement areas (if				
What Des	at is the proposed life of the plan? scription of hapū/iwi areas of interest licable). Please include map if possib	(boundaries) and statutory acknowledgement areas (if				
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Plan development methods and estimated costs: The items below are an example only. You may use your own format.	
	Estimated cos
☐ Consultation hui (provide details below):	\$
, ,	
☐ Research (provide details below):	\$
,	
☐ Administration (provide details below):	\$
,	
☐ Site visit/field trip (provide details below):	\$
Constitution and (promas asiams selem).	•
☐ Workshops (provide details below):	\$
Workshops (provide details below).	Ψ
Other (provide details below):	Φ
☐ Other (provide details below):	\$

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Total estimated cost:

\$

(f)	What is the amount you would like Bay of Plenty Regional Council to contribute?							
	\$							
(g)	How will the hapū/iwi contribute to the development of the plan? (Financial and actual)							
8	Bank account details:							
	Name of bank:		Br	anch:				
	Account name:							
	Account number:		G	ST number:				
	Please attach a pre-printed deposit slip to the application. GST will only be paid if the organisation is GST registered.							
9	Official lodgement of the final plan:							
	Please note that successful applicants will be required to officially lodge their final plan with Bay of Plenty Regional Council. The plan will become a public document. The plan will be placed on the Council's website.							
10	Authorised signature/s for application:							
	Name:							
	Role:							
	Signature:		Date:					
	Name:							
	Role:							
	Signature:		Date:					
11	Applications can be directed to:							
	Postal address:	Māori Policy Section Bay of Plenty Regional Council PO Box Whakatāne 3158	Phone: Fax: Email:	0800 884 880 0800 884 882 <u>MaoriPolicy2@boprc.govt.nz</u>				

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