Regional Safety Rescue Services (RSRS) Fund Application Form

The Regional Safety and Rescue Services (RSRS) Fund supports organisations that provide vital safety and rescue services to both local people in our community, and visitors to our region.

This centralised funding approach enables organisations to apply for funding for operating costs (not Capital) through one central process endorsed by Councils in the BOP region and means they do not have to apply to each council individually.

Funding applications will be considered by the Civil Defence Emergency Management (CDEM) Committee and funding recommendations will be made to BOPRC. Final funding decisions will be made through the Bay of Plenty Regional Council Annual Plan 2022/23 process.

Applicants will be required to fulfil the following criteria

The beneficiary organisation must:

1. Provide rescue services to residents of and visitors to the Bay of Plenty region; and
2. Be a charitable organisation performing rescue services in the Bay of Plenty region; and
3. Have had a form of existing funding arrangement with, or been referred by, a territorial authority within the Bay of Plenty region; and
4. Be a registered charity under the Charities Act.

Funding is only for:

1. Contracts for services with individual units/clubs/areas.
2. Operational costs of individual units/clubs/areas.
3. Operational costs incurred by the umbrella organisation in supporting individual units/clubs/areas.
4. Costs associated with coordination of regional rescue services across the region.
5. Capital expenditure would not be funded.

RSRSF applications are to be sent by email to [RSRSF@boprc.govt.nz](mailto:RSRSF@boprc.govt.nz) or post it to us at:

Attention: Matt Searle – Corporate Planner

Regional Safety and Rescue Services Fund Application

Bay of Plenty Regional Council

PO Box 364

Whakatāne 3158

What to expect

Funding applications cover the period from 1 July 2022 to 30 June 2024.

Staff may request further information or want to meet with you to ask further questions, to ensure that they have a full understanding of what you and your group are looking to do.

If you would like assistance on any part of this funding application, please contact Matt Searle at [RSRSF@boprc.govt.nz](mailto:RSRSF@boprc.govt.nz)

All decisions are at the discretion of Council. Funding requests can be fully approved, partially approved, or declined by Council. You will be informed of any decision following Council Deliberations, and if a funding request is successful, Council staff will be in touch with you to progress a formal Funding Agreement following the adoption of Councils Annual Plan.

**If full funding is approved:** Council will expect the proposed goals, activities and budget details in the final Funding Agreement to closely align to those included within the submission and funding application. Where relevant, an additional Health & Safety declaration will also be required.

**If partial funding is approved:** Should Council approve only partial funding, Council staff will contact funding recipients as to the details of the decision, and your group/organisation will receive a letter outlining what funding has been approved.

Completing the funding agreement

An assigned RSRSF Council liaison person will work with you to:

Set the specific goals and milestones for your funding agreement.

Agree the timing of payments (as payments may be dependent on reaching specific milestones).

Agree upon reporting and review processes.

Finalise details for your Funding Agreement.

**NOTE**: *If the goals/milestones set out in the funding agreement are not achieved, this may impact on approval of instalment payments and may impact future applications.*

1. Applicant details

|  |  |
| --- | --- |
| **Name of Organisation/unit/club/area** |  |
| **Registered Charitable No.** |  |
| **Postal Address** |  |
| **Website/Social Media** *(if applicable)* |  |
| **Primary Contact** | |
| **Name of contact person** |  |
| **Role** |  |
| **Phone number** |  |
| **Email address** |  |
| **Secondary contact** | |
| **Name of contact person** |  |
| **Role** |  |
| **Phone number** |  |
| **Email address** |  |
| **Bank account details for Group/Organisation\*** | |
| **Bank/Branch** |  |
| **Account Number** *\*cannot be a personal bank account* |  |
| **GST Number** |  |

|  |  |
| --- | --- |
| **Conflict of Interest** | |
| **Conflict of Interest** *(Enter details of any existing relationships that members/ trustees of the applicant have with staff at Council or Councillors).* |  |

1. Previous funding information

|  |  |
| --- | --- |
| **Summary of existing funding arrangements with BOPRC or any Territorial Authority within the BOP region(If any)** |  |
| **Reference number (if known)** |  |
| **OR** | |
| **Please advise which TA has referred you for this funding and a contact email address (if relevant)** |  |
| **Summary of TA referral** |  |

1. Funding sought for 2022/2023 and 2023/2024

|  |  |  |
| --- | --- | --- |
| **Services to be provided (short title):** | e.g. Surf lifesaving services | |
| **Summary of RSRS to be provided (briefly summarise – max 500 characters)** |  | |
| **How many years are you seeking funding for?** | 1 year ☐ | 2 years ☐ |
| **How much total funding are you requesting\*?** | 2022/2023 | 2023/2024 |
| $ | $ |

*\* Please use the figure from your completed budget (Appendix below) NB: Exclusive of GST if your group is GST registered, inclusive of GST if not registered*

|  |
| --- |
| **Community wellbeing**  *(Provide details of how the services provided contribute to the wellbeing of the community)* |
| *In this section explain how the funding you are seeking will help contribute to achieving greater wellbeing through delivering improved safety and rescue services in the BOP. Please attach any supporting information.* |
|  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Funding narrative**  *(Provide a more detailed description for the funding being sought)* | | | | | |
| *Please explain what the service is you provide (and are seeking funding for), what geographical area is covered/serviced. Provide a summary of what funds will be spent on and what (if any) implications would be if the funding was not provided (if applicable), with additional detail at Appendix 1 if required.* | | | | | |
|  | | | | | |
| *In the table below please provide detail of how the services being provided will be measured and any goals related to them. Also where the service will be provided.* | | | | | |
| **Service seeking funding** | **Where Service is provided (Council area)** | **Funding allocation** | **When are services provided** | **Service Measures** | **Goal/Estimate** |
| *e.g. Patrols provided in the BOP area* | *e.g. Tauranga City Council, Rotorua Lakes Council, or Region Wide* | 2022/23: $xxx  2023/24: $xxx | *e.g. All year round, 6 monthly* | *e.g. Number of people rescued, hours of operation, geographic coverage* | *e.g. 20 rescues per month, 24/7 service* |
| *E.g. Community education/ engagement activities programmes* |  | 2022/23: $xxx  2023/24: $xxx |  | *e.g. Number of education/engagement programmes delivered* | *e.g. 10* |
| *e.g. Volunteer support coordination* |  | 2022/23: $xxx  2023/24: $xxx |  | *e.g. Number of volunteers involved, Volunteer hours* | *e.g. 50 volunteers, 500 volunteer hours* |
|  |  | 2022/23: $xxx  2023/24: $xxx |  |  |  |

1. Declarations

Applicant declaration

We, as Applicant, make the following declarations:

This application has the formal approval of our Trustees/Board/Members;

We acknowledge that the details given in this application, or supplied by the organisation in support of this application are true and correct to the best of our knowledge.

We will provide Council with any updated or additional information should the information or circumstances described in this application form change.

We authorise Council to disclose our information to any third party it chooses for the purpose of verifying the accuracy of the information in the application, and evaluation and decision making concerning the application.

We acknowledge that the information provided in this application may be made public and consent to such publication. In particular, Council may publish the name of our organisation, a description of services to be funded, the amount of the funds awarded and any photographic images.

We understand that if this application is successful, the funds awarded will be applied to the purpose as stated in this application and not applied to any other purpose without the express permission of Council having first been obtained.

We acknowledge that any decision made by Council is final. We accept that no reasons for such decisions will be given, nor will any correspondence be entered into.

We have disclosed any other previous funding in relation to RSRS received from any Council within the Bay of Plenty region.

We agree to sign a contract Funding Agreement with Council in a form acceptable to Council and that no funds shall be paid prior to signing of that Agreement.

We are a registered charity (under the Charities Act 2005) providing rescue services within the Bay of Plenty region.

We agree that Council can use the services funded and our organisation in promotional material.

We acknowledge that the privacy statement of Council (available at https:[//www.boprc](http://www.boprc.govt.nz/privacy).[govt.](http://www.boprc.govt.nz/privacy)n[z/privacy](http://www.boprc.govt.nz/privacy)‐ statement) will apply to any personal information contained in this application.

I, the below named\*, warrant that I am authorised, and have capacity, to sign this application form and make the above declarations, on behalf of the Applicant:

|  |  |
| --- | --- |
| Full name |  |
| Position in organisation |  |
| Signature |  |
| Date |  |

**\****This section needs to be signed by the person named above in section 1 who has the authorisation to enter into a Funding Agreement.*

Checklist

Have you…

Completed all sections on this form?

Attached all relevant supporting documentation including:

* + Proposed budget
  + Any additional information that helps support your application

Signed and dated the application form.

Any questions?

For any assistance, please contact [RSRSF@boprc.govt.nz](mailto:RSRSF@boprc.govt.nz)

Appendix 1 – Budget Proposal ‐ Year One *(Double Click to Open Excel Spreadsheet)*

