# Whakatane District Business Recovery Grant

# Application Form

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| **Whakatane District Business Recovery Grant Application** |
| Eligibility criteria are that the business:   * suffered a significant and sustained loss of income caused by the recent storm events - resulting in at least a 60% drop in revenue for a minimum of four weeks * was viable before the storm-related disasters and has the potential to successfully recover * has no other efficient options available, including insurance must have fewer than 20 employees * must pay staff at least minimum wage * is not a charity or primary producer.   Grants will need to be for a specific reinstatement purpose, such as a refit or relocation. Businesses will need to show how much they want and what they want to spend it on. For example, businesses may apply for a grant for shop refits or relocation expenses (excluding wages and associated staff costs). The grant is not intended to cover uninsured losses. |

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| **Applicant details** | | | |
| Business name: | | | |
| Contact name: | | | |
| Position in company: | | | |
| Business bio: | | | |
| **Contact details:** | Postal address: | Cell phone: | Landline: |
| Email: | Website: | |
| **Financial performance**  Actual turnover (31 March 2016):  Actual turnover (31 March 2017):  Forecast year-to-date turnover (31 December 2017): | | **Full-time employees**  Last year:  Currently: | |

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| **Application** |
| Summary of current business situation: Impact of the flooding. |
| Describe any current or past tax issues for the business. |

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| **Grant funding distribution request** | | |
| **Amount:** |  | |
| **Proposed use of funds:** |  | |
| **How will we know the grant has been effective?** |  | |
| **Approval:** | Approved by: | Date: |
| **Bank account details:** | Account Name: | Account Number: |

## Attachments – please attach the following information with your email or hard copy application:

* External accounts for year ending 31 March 2016
* External accounts for year ending 31 March 2017
* Year-to-date management accounts showing the drop in revenue for a minimum of four weeks
* Cashflow forecast for the period 1 May – 31 December 2017
* Budget showing how the funding will be spent and objectives to be achieved
* Statement of personal financial position
* Copy of bank deposit slip or certified bank account details
* Any other information to support application

If you are unable to supply these electronically please indicate that hard copies will be posted. These should be clearly marked with the business name used in this application.

\*I/We acknowledge all information supplied to the grant programme to assist with the assessment and approval of funding is accurate and not misleading.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Applications should be emailed to: [business.grants@whakatane.govt.nz](mailto:business.grants@whakatane.govt.nz)

OR posted to Business Recovery Grant Application, C/- Whakatane District Council, Private Bag 1002, Whakatane

On submission, this information will be sent to the BRGP assessment panel for consideration. You will receive an email notification on receipt of your application and the Assessment Panel Co-ordinator, Gerard Casey (Tel. 027 271 9032; Email: gerard@ebopchamber.co.nz) will also contact you if further information is required.