

Helping Kaikōura District move forward as a great place to live with a strong, well-connected community, that is ecologically exemplary and economically prosperous



Kaikōura Contestable Biodiversity Fund Application

Applicant:

Organisation (if applicable):

Address:

Phone number:

Email:

Site street address/name and/or coordinates:

Total area of project site (ha):

Legal status (circle all that apply): Freehold Land Covenant Customary Māori Land

Significant Natural Area Reference (if applicable):

If applicant is acting on behalf of landowner(s)/trustee(s):

Contact information for (circle or bold one): landowner(s) trustee(s)

Name:

Phone number:

Email:

Address:

Project Description:

Project start date:

Name of person who will be responsible for project health and safety:

Aims (Briefly describe the work you plan to do):

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Project Costs:

Summary: (detail below the total cost of the project including contractors, equipment, costs that will be covered by other external funds and in-kind contributions). GST inclusive.

Council contribution (requested from the Biodiversity Fund in this application)	Applicant/landowner contribution (including in-kind contributions from cost breakdown below)	Funding from other external sources	Total Cost of project

Cost breakdown (add rows as needed):

Contractors Contract estimate of hours, hourly rate	\$
Total contractor costs	\$

Equipment/ materials purchase, hire or rent; plants etc.	\$
Total equipment/materials costs	\$

Estimated applicant/landowner in kind contributions: Volunteer time (number of hours and equivalent hourly pay rate), use/donation of equipment	\$
Total landowner/applicant contribution	\$

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Biodiversity management plan

Provide an overview of how you plan to protect and enhance biodiversity at the project sites over a longer time period than the 12 months of the project funding.

(If you already have a Farm Biodiversity Plan, or a Farm Environment Plan with a biodiversity component, you can use that. Otherwise, you can provide a simple management plan on the following table, adding rows as needed.)

Biodiversity Management Action Plan			
Aim	Action(s)	Measures of progress	Month/Year

Declaration

I (full name) hereby affirm that I am the authorised person to complete this grant application on behalf of the landowner(s).

I declare that, to the best of my knowledge, the information supplied herein is true, correct and complete and I/we agree to the terms and conditions as set out in this Application Form. I/we agree that the Christchurch City Council will not be held liable for any false or misleading information supplied by me/us.

Signed (Applicant):

Signed (Landowners, if different from applicant):