

Community Waterways Partnership Fund Application 2026 27

Form Preview

Applicant Information

* indicates a required field

The purpose of this fund is to support collaborative, community scale projects that improve, protect, and celebrate urban waterways in Ōtautahi and contribute to the work of the Community Waterways Partnership.

Note: After you submit your application, you will receive an email with a funding request number on it. This will confirm that your application has been submitted.

This may go to your spam/junk. The funding request number will begin with CWP2627XXXX".

If you do not receive an email with this number on it, please log back in and check your application for errors. After checking, if you have still not received an email with the funding request number on it, please contact the Funding Team on 03 941 5488.

An informal group (unincorporated or without charitable status) can apply but it:

- cannot apply for more than \$2,000
- must have a bank account in its own name

OR can use an umbrella organisation - see below.

Project Contact Details

For individuals - If your application is successful, our Accounts Department require your full name (First, Middle and Surname) and your date of birth to confirm your identification. If you do not have a middle name, please enter N/A.

For Organisations - We just require the organisations contact person's name. We do not require their date of birth.

Payment cannot be set up in our accounting system without this information.

Name of the lead organisation or individual applying to this fund

☐ Individual ☐ Organisation

Organisation Name

Title	First Name	Last Name
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Physical Address

Address

Contact Phone Number

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Must be a New Zealand phone number.

Contact Email

Must be an email address.

Organisation contact details

Contact Name / Individual's Details *

First Name

Last Name

Middle Name

Date of Birth

Required for payment if application successful

Position held in organisation

Applying with an umbrella organisation

Are you using an umbrella organisation for this funding request?

☐ Yes

☐ No

Umbrella organisation

If you are using an umbrella organisation, once you have submitted your application you will be required to provide information about that group.

Both groups will need to sign this agreement so we know that you both understand your obligations in applying and, if granted, receiving funds.

[Download the Agreement for Umbrella Groups.](#)

Download a resolution to umbrella the group applying to this fund.

If we do not receive a signed umbrella agreement 4 weeks after the fund closing date, **your application will automatically be withdrawn.**

Applicant Organisation Details

Applicant NZ Charity Registration Number (CRN)

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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.

Applicant NZBN

The NZBN provided will be used to look up the following information. Click Lookup above to check that you have entered the NZBN correctly.

New Zealand Companies Register Information
NZBN
Entity Name
Registration Date
Entity Status
Entity Type
Registered Address
Office Address

Must be formatted correctly.

Applicant Primary Website

Must be a URL.

Bank Details

Please complete the details below for the bank account that the money, if granted, should be paid into.

Attach a current bank statement or deposit slip for the account listed. This should be autogenerated by your bank. The slip should include your full bank account number and account name.

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Applicant Primary Bank Account

Account Name

Account Number

Must be a valid New Zealand bank account format.

Bank Deposit Slip

Attach a file:

Project Information

* indicates a required field

Project Title *

Maximum 10 words

Short project description *

Word count:

Must be no more than 250 words.

Provide a short description (100 words recommended) of your project - what are you out to do?

What are the primary areas of focus for this project/programme? *

No more than 5 choices may be selected.

You can select items from any area of the list – all have equal value. Only select sub-categories if you want to be more specific. In this question we want to know about the field of work (e.g. arts, sport, health), rather than the types of people it will affect (e.g. young people, refugees)

Who are the primary beneficiaries of this project/programme? *

No more than 5 choices may be selected.

Please choose only the group/s that are at the very core of this project/programme

Dates

Start Date

Must be a date.

End Date

Must be a date.

Community Outcomes

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Who are the key groups/ people involved in organising the project, event or activity? *

Word count:
Must be no more than 250 words.

What is the nature and scale of the benefits that will be delivered by the project, event or activity? *

Word count:
Must be no more than 200 words.

How will this project support the Community Waterways Partnership's Action Plan and meet the Fund Eligibility Criteria? *

Word count:
Must be no more than 200 words.
The Funding Criteria is here: <https://ccc.govt.nz/culture-and-community/community-funding/waterways-partnership-fund>

What will successful delivery look like and how will you measure, report and share project success? *

Word count:
Must be no more than 200 words.
Describe three changes you will see if the expected outcomes of the project occur (150 words recommended)

Impact on Mana Whenua

Will this project impact Mana Whenua?

☐ Yes ☐ No

Describe the impact on Mana Whenua

If yes, what is the impact on Mana Whenua?

Word count:

Climate Change

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Does your project increase in wider community climate literacy and/or preparedness?

- ☐ Yes ☐ No

Does the project reduce emissions?

- ☐ Save power ☐ Increase use of electric equipment/electric/hybrid vehicle use
- ☐ Generate renewable energy ☐ Reduce, reuse, recycle materials, equipment or other
- ☐ Reduce car trips ☐ Other:
- ☐ Reduce use of petrol/diesel equipment

Does the project contribute to reducing climate risk?

- ☐ Increase in shade vegetation/structures ☐ Local food produced
- ☐ Increase in pervious surfaces ☐ Reduction in pest species (flora or fauna)
- ☐ Increase in stormwater absorption capacity ☐ Reduction in flammable weeds and/or vegetation
- ☐ Increase in community understanding of climate change impacts (community education events/surveys) ☐ Increase in mulching/plant protection
- ☐ Water saved or stored ☐ Community Resilience
- ☐ Trees or other vegetation planted ☐ Other:

Does the project improve other outcomes (co-benefits)?

- ☐ Biodiversity restored ☐ Water quality improvements
- ☐ Biodiversity protected ☐ Employment/career experience opportunities created
- ☐ Soil carbon restored ☐ Food security
- ☐ Waste diverted from landfill ☐ Other:

Budget / Costs

Income for this Project

Please list all relevant income related to this project. Click "**Add More**" or the '+' button to add additional lines.

Income Detail	Total Amount
	Must be a number.

Expenditure for this project

Funded projects should be ready to start within four months and be completed within twelve months.

Please list all relevant expenses related to this project in the 12 months from receipt of the funds. Click "**Add More**" or the '+' button to add additional lines.

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Cost Description **Expenditure Category** **Total Cost (\$)** **How much (\$)** **Is this item essential to the project to proceed?**

		Total \$ amount (eg 1000). No comma's, \$) Must be a number.	Must be a number.	
				☐ Yes ☐ No

In Kind Contributions - for entire project

Estimated applicant in-kind contributions and income or cash contributions should be listed here:

- Volunteer time (number of hours and equivalent hourly pay rate) (ten volunteers @ 8 hrs per day for 7 days - $(10 \times 8) \times 7 = 560$ with an hourly rate of \$29.90/h (the current living wage) = \$16,744
- Labour
- Use/donation of equipment
- Cash contributions
- Donated material costs

Contribution Description

Total Contribution Costs (\$)

	Must be a number.

Please attach a detailed budget for your project, event or activity including both income (including other funding) and expenditure

Attach a file:

Funding Totals

Total Project Cost

This number/amount is calculated.
What is the total budgeted cost (dollars) of your project?

Total Amount Requested from Council (\$)

This number/amount is calculated.
What is the total financial support you are requesting in this application?

Total Income

This number/amount is calculated.

Supporting Documents and Declaration

Upload any additional supporting documents

Please upload any additional supporting documents that you feel might support your application. This upload button can be used to add multiple files to the application.

Documents you may wish to provide in support of your application include:

- Job descriptions, when applying for salary or wages
- Staff curriculum vitae to provide evidence of relevant skills and experience
- Your most recent annual report
- List of volunteer's duties if applying for volunteer costs
- Quotes for significant goods, services, or contracts
- Project plan or business case
- Designs or images
- Supporting research, evidence or examples
- Letter of support from partners, stakeholders or end users.
- A letter of agreement from umbrella organisation.

File Upload

Attach a file:

Confidential Information

Is there any aspect of your application that is confidential?

☐ Yes

☐ No

What specific aspects of your fund application are confidential and why?

Word count:

Must be no more than 100 words.

This application form and the Councils funding decision for all successful and unsuccessful applications will be publicly released following the Councils funding decision, with any sensitive or confidential information redacted.

If there are aspects of your application that are confidential in accordance with the [Local Government Official Information and Meetings Act](#), clearly state this below.

When will the information no longer be confidential and what conditions or timeframes would allow this information to be released?

Word count:

Must be no more than 100 words.

Declaration

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I/we confirm that this application has been approved by the appropriate authorising body of the organisation, and that this has been minuted at an appropriate Board/Committee meeting.

I/we have read and accept the Christchurch City Council's [Grant Terms and Conditions](#).

For the purpose of processing this application and assessing our group's eligibility, we authorise the Council to:

- Collect information about this application, including name, contact information and bank details, and our group, and disclose such information to, third parties; and
- Collect, retain, use and disclose personal information about individuals who are noted in this application. We confirm we have consent to authorise this.

We collect your personal information in order to assess your funding application and any subsequent applications.

We keep the personal information in accordance with the Privacy Act 2020. We hold it safe by storing it with Smartygrants and between servers it is encrypted using HTTPS (TLS 1.3 by default, TLS 1.2 is supported for older browsers).

We only allow authorised Council staff to access this information.

By submitting an application, you consent to council publishing the applicant's name, project description and amount funded on our website. This information may also be used for promoting Christchurch City Council's grant program.

You have the right to ask for a copy of any personal information we hold about you, and to ask for it to be corrected if you think it is incorrect. If you'd like to ask for a copy of your information, or to have it corrected, please contact us at communitygrants@ccc.govt.nz, or phone 03 941 5488.

I/we solemnly declare that the details contained in this application are true and correct to the best of our knowledge and we have authority to commit to the above conditions.

☐ I/we have read and agree to the above.

Tell us about your experience completing this form

You are now at the end of this form. Before you review your application, we would appreciate if you would please take a few moments to provide some feedback.

Please ensure that you push 'Submit' once the application is completed for the form to be submitted. Late applications will not be considered.

Please indicate how you found the application form:

☐ Very Easy ☐ Easy ☐ Neutral ☐ Difficult ☐ Very Difficult

Please provide us with your suggestions about any improvements and/or additions to this form that you think we need to consider:

Did you find the application process useful in helping to understand your own work?

☐ Yes ☐ No ☐ Don't know

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Any final comments?

Click on "Next Page" to review and SUBMIT your Applicaton form