



BREEDDE-OLIFANTS
CATCHMENT MANAGEMENT AGENCY

Cnr Mountain Mill & East Lake Roads, Worcester, 6850
101 York Street, George, 6530

APPLICATION FORM FOR GRANT FUNDING

NAME OF PROJECT	
LOCATION	
AMOUNT REQUESTED	

APPLICATION FORM TO BE COMPLETED BY THE BENEFICIARY

CHECKLIST	Attached: Yes/No
Application Letter	
Proof of NGO/NPO Registration	
Copy of Constitution	
Proof of regular meetings (agendas , attendance registers and minutes)	
Board members' list with contact details and certified ID copies	
Organisation's banking details confirmation letter (stamped by bank)	
Existing financial control system of Organisation	
Equity Plan of Organisation	
Lease agreement (where property is not owned by applicant)	
Proof of access (i.e. water rights/GA/permit) to water	

1. PARTICULARS OF THE APPLICANT (BENEFICIARY)

NGO/ NPO Name												
NGO/ NPO Registration No												
Title		Surname										
First names in full												
Date of birth			Y	Y	Y	Y	M	M	D		D	
Gender												
Position in Organisation												
Identity number											Telephone. No.	
Physical address												
		Code										

2. BACKGROUND AND ACTIVITIES OF ORGANISATION	
Background of the Organisation	
Activities of Organisation	

3. NAME, BACKGROUND, PURPOSE AND OBJECTIVES OF PROPOSED PROJECT	
PROJECT NAME	
PROJECT BACKGROUND	
PROJECT PURPOSE	
PROJECT OBJECTIVES	

BENEFICIARIES	
JOBS OPPORTUNITIES CREATED	
PEOPLE BENEFITTING FROM THE PROJECT	WOMEN –
	YOUTH –
	DISABLED –
	CHILDREN –
	MEN –

5. LOCATION		
District municipality		
Local municipality		
Town		
Village		
Farm		
6. DECLARATION		
I (full name and position in block capital letter)		
<i>Declare that all the information provided in this application is complete and correct to the best of my knowledge. I understand that any false/misleading information supplied could lead to our application being disqualified.</i>		
Signature:	Place :	Date:

7. FOR OFFICIAL USE	
Application form checked by:	
Position	
Recommended to Grant Assessment Committee	
Date:	