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Eligibility

The purpose of this grant is to reduce the financial burden of development contributions on the development of Papakāinga housing on Māori land.

To be eligible for this grant, applications must be:

- on Māori land
- for housing
- not for primarily commercial purposes
- within Tauranga City Council boundaries

Māori land is defined as Māori customary land and Māori freehold land as defined in Te Ture Whenua Māori Act 1993.

The supporting information for this application will be obtained through your building consent application.

The grant is used to offset the cost of the city wide development contributions associated with the development. The grant is not paid directly to successful applicants but is instead an internal transfer within Tauranga City Council.

Click here to read the Tauranga City Council SmartyGrants Privacy Statement.

Contact Details

* indicates a required field

Privacy Notice

We will respect and uphold your rights to privacy protection under the information privacy principles in the New Zealand Privacy Act 2020. To view our specific privacy statement that is applicable to your application and this online grant administration service, go to our Tauranga City Council Smarty Grants privacy statement

New Section

Applicant Contact * ○ Individual Organisation Name		○ Organisation	
Title	First Name	Last Name	
Title	riist Naiile	Last Name	

Address Address

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Phone Number				
riione Number	Must be a I	New Zealand phone	number.	
Email *				
Liliali	Must be an	email address.		
Development Details				
* indicates a required field				
Street address/ legal descript	ion of the	e papakāinga ho	using developm	ent *
Legal owner of the land *				
Building Consent Number *				
Please confirm that the devel	onment is	s for housing on	lv *	
	opinent is	o for flousing offi	· y	
Please confirm that the development of the commercial purposes * □	opment is	not being unde	ertaken for prim	arily
Declaration				
* indicates a required field				
I certify that the statements r	made with	nin this applicati	ion are true and	correct.
I agree *	○ Yes		○ No	
_		Final Name -		
Name *	Title	First Name	Last Name	

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Date of declaration *

If the application is being made by ar declaration must be made by a trust member	
Must be a date	