

Check list for Applicants

Please Delete this page before submitting

Before filling out this form, please make sure you have read Part B: Background Information. and Part C: Application Terms.

Everything written in **PURPLE** in this document is information for the Applicant (you). Delete these **PURPLE** parts before submitting the Application Form. Everything shaded in **BLUE** is customisable by you. When you have completed these areas, please un-shade them.

Task	✓
1. Read the eligibility criteria	
2. Complete all sections of the Application	
3. Delete all purple 'tip' boxes from the Application.	
4. Remove all Blue highlight from the Application.	
5. Review your Application and submit all relevant information that supports your applications (along with the Application) before the deadline time/date. No late entries can be accepted	

Part A: Application Form

Community Cash Service Trials

He Whakamātautau i te
Pūnaha Moni a-Rohe

Insert Town Name

1.1 Profile

Item	Detail
Town:	[name of town applying]
District or City Council:	[name of district town is in]
Mana whenua is held by:	[name iwi / hapu as appropriate]
Number of businesses within the town:	[including retailers, hospitality, accommodation etc]
Town Profile: (optional)	[List any websites or community pages / media or any other sources profiling your town]
Contact name:	[insert your name]
Leadership Position:	[if an individual or the organisation name if on behalf of]
Organisation Type:	[Iwi or subsidiary (including hāpu), City / District Council or Community Board, Retailer, Business or economic development group, community organisation]
Email address:	[insert email address]
Phone No:	[best contact number and time/day preference]

1.2 Endorsements

By agreeing to endorse this application, Endorsers confirm that they:

- Have contributed to, or reviewed, this application and endorse it.
- Have identified any information provided in their endorsement below that is confidential or sensitive.
- Acknowledge that information given in their endorsement will be used to process it, for research purposes (we will use anonymised information for any published reports), and that we may also be required to consider requests under the Official Information Act or the Privacy Act. Please note that we take privacy, security, and protection of commercially sensitive information seriously and will consult with you first before making any such decision in accordance with the relevant law.
- Have delegation or authority to make the endorsement if it is given on behalf of an organisation.

Endorsement #1	Detail
Endorsers Name:	[name of the person or organisation]
Leadership Position:	[if an individual or the organisation name if on behalf of]
Organisation Type:	[lwi or subsidiary (including hāpu), City / District Council or Community Board, Retailer, Business or economic development group, community organisation]
Email address:	[endorser's email address]
Phone No:	[best contact number and time/day preference]
Affirmation:	[insert any statement or qualification of endorsement you wish to make]

Endorsement #2	Detail
Endorsers Name:	[name of the person or organisation]
Leadership Position:	[if an individual or the organisation name if on behalf of]
Organisation Type:	[lwi or subsidiary (including hāpu), City / District Council or Community Board, Retailer, Business or economic development group, community organisation]
Email address:	[endorser's email address]
Phone No:	[best contact number and time/day preference]
Affirmation:	[insert any statement or qualification of endorsement you wish to make]

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Endorsement #3	Detail
Endorsers Name:	[name of the person or organisation]
Leadership Position:	[if an individual or the organisation name if on behalf of]
Organisation Type:	[Iwi or subsidiary (including hāpu), City / District Council or Community Board, Retailer, Business or economic development group, community organisation]
Email address:	[endorser's email address]
Phone No:	[best contact number and time/day preference]
Affirmation:	[insert any statement or qualification of endorsement you wish to make]

CLOSED

FOR INFO ONLY

1.3 Eligibility



Applicant TIP

- You must be able to answer 'yes' to each of these pre-conditions.
- 'Yes' means you currently meet the pre-condition.

#	Eligibility	Meets
1.	Population of between 1,000 and 10,000 residents	[Yes/No]
2.	Any over-the-counter cash banking services offered in the town must not be open to customers for more than 40 hours a week (total hours for all banks with branches or agencies in the town).	[Yes/No]
3.	Not be host to a New Zealand Banking Association Banking Hub	[Yes/No]

CLOSED - FOR INFO ONLY

Section 2: Your Story

1. Cash Story & Approach to the Cash Trials	Weighting 70%
<p>a. Why do you want your town to participate in the trials? (Photos and links to other resources like videos can be included to support your response if desired). (30%)</p> <p>Which of the trial solutions do you think would work for your town and why? (As described on Page 3 Part B: Background Information)</p>	
<p>[insert answer here]</p>	
<p>b. Please give details of what access the town has to cash banking services including the extent to which the town has no (or limited to) over the counter commercial bank services or ATM cash services. What is the distance to the nearest town or city that does offer over the counter cash banking or ATM cash banking services (20%)</p>	
<p>[insert answer here]</p>	
<p>c. Please provide details of the support and willingness of community leadership or retailers to participate in these community cash trials (20%)</p>	
<p>[insert answer here]</p>	

2. Infrastructure	Weighting 30%
<p>a. Please describe your town's security profile. What security related observations can you tell us about? (15%)</p>	
<p>[insert answer here]</p>	
<p>b. Please provide details of the availability and suitability of potential site(s) to locate a cash depot or cash management services? (Photos can be submitted if desired) (15%)</p>	
<p>[insert answer here]</p>	

Section 3: Declaration

By submitting this application, I/we confirm that:

- I/we have familiarised ourselves with, and accept, the contents of:
 - Part B: Background Information
 - Part C: Application Terms (Process Details)
- I/we have assembled the information and statements made in this application with care, accuracy, honesty, and fairness.
- I/we have the consent of the endorsers of the Application for the inclusion of their endorsement and information.
- I/we have identified any information provided in our Application that is private, confidential or sensitive.
- I/we acknowledge that information given in the Application will be used to process it, for research purposes (where any published reports will use anonymised information), and that RBNZ may also be required to consider requests under the Official Information Act or the Privacy Act. (Please note that RBNZ takes privacy, security, and protection of commercially sensitive information seriously and will consult with you first before making any such decision in accordance with the relevant law.
- I/we consent to RBNZ confirming and/or publishing that an application was made on behalf of the named town/s and the result of that application.
- I/we have delegation or authority to make the Application when it is made on behalf of the relevant organisation.
- the Applicant has no actual, potential or perceived Conflict of Interest in submitting this Application and that, should a Conflict of Interest arise during the application process, the Applicant will report it immediately to RBNZ's Point of Contact.

Signature: _____

Full name: _____

Title/position: _____

Name of organisation: _____

Date: _____