Organisation Declaration

We, the undersigned, hereby declare that:

- 1. [insert name of person completing online application] has the authority to make this application on our organisation's behalf.
- 2. The information presented in this application about the applicant organisation and the specific proposal/project for which grant funds are requested is true and correct to the best of our knowledge.
- 3. We have the authority to make this application on behalf of the applicant (if the applicant is not a natural person).
- 4. This application has **not** been completed by a person who has any management or ownership interest in a TAB NZ Venue that hosts gaming machines (I.e. "a gaming machine key person").
- 5. When any grant money is obtained the persons who decide how that money is spent will **not** be TAB NZ gaming machine venue key person.
- 6. When any grant money is obtained, a check will be undertaken and no payment will be made from grant money to any TAB NZ gaming machine venue key person for any goods or services.
- 7. The person completing this application is **not** a member or employee of the organisation providing the services or goods for which funding is sought.
- 8. This application includes complete information relating to other sources of funding that our organisation has received, been pledged, applied for, or intends for future application for this project.
- 9. All prices and quotes included in this application represent the actual costs that will be incurred by our organisation.
- 10. We have read, understood and will comply with the Condition for Allocation of Funds and Audit and Inspection requirements, including TAB NZ's accountability and audit requirements, relating to the application for which this declaration is submitted. We also agree to participate in, at our organisation's own expense, any inspection or audit by the Department of Internal Affairs if the Department or TAB NZ (or its Agent) so requests.
- 11. We have the authority to sign this declaration on behalf of the applicant organisation.

Signature One Dated: ______ Signature of Office Holder _____ Full Name: ______ Position: _____ Signature Two Dated: _____ Signature of Office Holder ______ Full Name: ______ Position: ______