

Revised Criteria for Drinking-water Subsidies

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1 Introduction

In May 2005, the Government announced it would make subsidies available from 2006 to 2016, to help small communities improve their drinking-water systems. These subsidies are administered by the Ministry of Health. This document sets out the criteria and processes that will be used to determine eligibility for drinking-water subsidies.

1.1 Technical assistance

Technical assistance is available to water suppliers through their local District Health Board (DHB) public health unit (for contact details, see Appendix 1). This assistance aims to help water suppliers determine how best to operate a small drinking-water supply and how to manage the risks associated with providing drinking-water to a community. It will also provide information on options for upgrading or improving supplies. It will help small drinking-water suppliers to optimise their operations and make the most effective use of existing equipment.

Seeking technical assistance from the public health unit is a prerequisite for any application for a drinking-water subsidy. Public health staff will also assist eligible water suppliers to apply for drinking-water subsidies.

Technical assistance will focus on developing public health risk management plans (or water safety plans) for drinking-water supplies. These plans will help to identify any improvements that need to be made to ensure that the water from the supply is safe to drink and can be managed in a sustainable manner.

1.2 Drinking-water subsidies

The subsidies aim to:

- assist small water suppliers in disadvantaged communities to provide safe drinking-water
- make funding available to community water supplies that have demonstrated a need for funding and have obtained technical advice from their local DHB public health unit
- help communities establish a reticulated drinking-water supply.

In September 2009, the Minister of Health put the drinking-water subsidies programme on hold in order to conduct a review of the eligibility criteria. The Minister wanted to confirm that the drinking-water subsidies were operating under the best possible process to ensure that the communities with the greatest need were accessing the available Government funding. The Minister was concerned that the first-come, first-served format of the previous programme structure meant that most funding was only available in the initial stages of the programme and some communities in need of subsidies might be missing out.

The review of the criteria has been completed, and the revised criteria discussed in this document reflect the advice received from local government, health officials and other interested parties.

2 Who is Eligible for Drinking-water Subsidies?

Drinking-water subsidies will be available to water suppliers that meet the criteria outlined in this document. Further information and technical advice is available from the DHB public health units (see Appendix 1 for contact details).

Not all drinking-water suppliers or communities are eligible to apply for drinking-water subsidies, but all may obtain technical advice from their local DHB public health unit.

Disadvantaged communities or drinking-water supplies that are owned and operated by a local authority or community for the benefit of the community as a whole may apply for drinking-water subsidies.

For the purposes of these criteria, a local authority drinking-water supply is a supply owned by a district council or regional or unitary authority. It excludes city councils and water supplies within city boundaries.

2.1 Eligible communities

Drinking-water suppliers applying for drinking-water subsidies must operate supplies for the benefit of the community as a whole. The supply must serve a maximum of 5000 people and a minimum of 25 people for 60 days of the year or 1500 person days per year. Eligible community water supplies are not operated for profit and are not able to charge fees. This excludes sports clubs, ski fields, camping grounds and other similar situations.

Eligibility will be restricted to those communities with a deprivation index or score (DI) of 7 and above (based on geographical meshblock areas).

Eligible water suppliers must also:

- be listed in the Ministry of Health Register of Community Drinking-water Supplies in New Zealand if they are an existing supply or agree to become registered if they are proposing a new supply
- be able to demonstrate that they have received technical advice from their local DHB public health unit (see Appendix 1 for contact details)
- have a public health risk management plan approved by a drinking-water assessor
- demonstrate that their drinking-water supply has been optimised (see 5.1.1 to follow)
- have prepared a sustainability plan that demonstrates the ongoing sustainability of the water supply (see 5.1.2 to follow).

Communities that currently do not have a reticulated drinking-water supply will be eligible to apply for drinking-water subsidies to establish a supply if it can be demonstrated that there is community support for the supply plan and there is a clear public health need.

Water supplies for communities that have a **fluctuating population** could still be eligible to apply for drinking-water subsidies to meet the needs of all of the community (ie, the maximum population size). However, where a community includes 'second homes' (such as holiday houses), these homes are assigned a DI of 3. This means, for example, that if 30 percent of a community's residential properties were owned as second homes, then these would be given a DI of 3, and the remaining 70 percent of homes would be given the DI from the census meshblocks. The overall DI will be calculated accordingly.

Where an **industry**, for example, a freezing works, places significant demand on the community's drinking-water supply, the percentage of subsidy funding for improving the drinking-water supply would be the percentage of the drinking-water used by the community rather than the industry. Because the water supply must be designed for the peak flow, the component assigned to industry is the demand when the industry is operating (ie, for seasonal industries). The industry would be expected to provide the balance of funding for improving the drinking-water supply.

In other words, the drinking-water subsidies are available to upgrade the water provided for human drinking only. They are not available for water supplies for which the primary use is industrial (including farming, irrigation and/or stock water) unless the industry funds the proportion of the supply used to meet its needs.

2.2 Supplies that are not eligible

If a supply does not comply with the criteria listed above, it is not eligible. The following list gives some examples for clarity but is not exhaustive.

Drinking-water subsidies will not be available for:

- government departments and Crown entities, including (but not limited to) the Ministry of Education, the Department of Conservation and the Department of Corrections
- city councils or within city council boundaries
- water supplies serving communities over 5000 people
- individual domestic dwellings and premises
- commercial organisations, such as home stays, restaurants and hotels
- not-for-profit organisations that charge fees, such as sports clubs
- replacing existing assets or purchasing land
- retrospective applications (ie, for capital works started before the introduction of subsidies scheme).

3 What will be Subsidised?

Water suppliers can apply for drinking-water subsidies in relation to two areas: construction and the purchase of equipment that is considered necessary in order to manage risks identified in the public health risk management plan.

As an example, subsidies may be provided for:

- increasing the quantity to normal design flows and/or improving the quality of the water supplied
- conducting raw water source works in order to extract either ground or surface water
- transferring water from the point of extraction to a treatment plant
- developing a treatment plant and reservoirs
- developing pre-treatment settling or raw water storage capabilities
- installing new distribution reticulation systems (to the property's boundaries)
- amalgamating two or more water supply infrastructures
- purchasing remote monitoring or alarm equipment or other necessary drinking-water supply equipment
- paying the fees of professional advisors for their technical or design assistance (under specific circumstances, for example, where the applicant can demonstrate that they have insufficient engineering capacity).

The subsidy for any single eligible proposal will be capped at \$1,000 per eligible person. The subsidy will only exceed this amount where an engineering review confirms that the application only includes what is required to provide safe drinking-water and represents value for money.

Subsidies will not be available for any other forms of works or activities. The following list gives some examples of exclusions for clarity, but it is not the definitive list:

- asset replacement costs
- land purchase
- training to enable operation of the plant (this can be supported through the technical advice available from the public health unit)
- sampling or analysis of raw or treated water to establish the nature of any treatment required to make the water safe for drinking (this is part of demonstrating optimisation)
- operational maintenance expenditure
- any infrastructure within a residential property boundary.

3.1 Staged applications

In rare cases, applicants will need to make a staged application. A staged application involves two stages:

- Stage 1: investigations and design (eg, test bores)
- Stage 2: capital works, including reticulation.

For example, a groundwater source might need to be investigated before a decision can be made about the optimal water supply if a surface water source were also available.

Approval of stage 1 for any staged application will not guarantee funding for stage 2. Further funding will depend, in part, on the application submitted for stage 2. If the combined value of stages 1 and 2 exceeds the \$1,000 per eligible community member cap, an engineering review would be required.

However, because of the investment in stage 1, applications for stage 2 of a staged application would be ranked and considered for subsidy ahead of any new applications.

4 How much Subsidy is Available?

The total amount of subsidy available in any funding year is \$10 million. All applications will be prioritised and ranked. The funding will be allocated to the applications from the highest scoring to the lowest until all of the funding available for that year has been allocated.

The percentage of the total capital amount that the drinking-water subsidies will fund will be determined by the size of the community and the disadvantage of the community. Smaller, more disadvantaged communities will receive a greater percentage of their required total capital costs than larger, less disadvantaged communities (see Table 1).

Some communities (eg, fewer than 200 people) may not be accurately represented on the DI. Where this occurs, the water supplier or community can outline the circumstances of their community in writing to their DHB public health unit (see Appendix 1 for contact details). The public health unit will assess the community's deprivation and allocate a new DI, which they will provide in a written notification to the applicant. This new DI can then be included in the application. The population considered is the normally resident population. As noted in section 2.1 above, where a community includes second homes (such as holiday houses), these homes are assigned a DI of 3, and the community's total DI is adjusted to reflect this.

Table 1 below lists the maximum percentage of the total cost of capital works that the drinking-water subsidies will fund. This percentage can be determined by reading down the table to the required row of a population band, and across the columns to the appropriate DI.

Table 1: Maximum percentage of costs of capital works that drinking-water subsidies will fund

Community size	Percentage of costs funded per deprivation index (DI)			
	7	8	9	10
4501–5000	50%	60%	65%	75%
4001–4500	55%	60%	70%	75%
3501–4000	55%	65%	70%	80%
3001–3500	60%	70%	75%	80%
2501–3000	65%	75%	75%	80%
2001–2500	65%	75%	80%	80%
1501–2000	70%	80%	80%	85%
1001–1500	75%	80%	85%	85%
501–1000	80%	85%	85%	85%
<500	85%	85%	85%	85%

Water suppliers and communities are encouraged to undertake some of the works themselves, wherever possible, as a 'contribution in kind'. For example they may dig trenches for pipes or install and connect storage tanks. However, activities such as project management cannot be considered as 'contribution in kind' activities. In recognition of this, such work may reduce the financial contribution that a community is required to make.

5 The Application Process

Drinking-water subsidy applications will be considered once a year and applications must be submitted by 28 February each year.

5.1 Prerequisites for applications

Before applying for a drinking-water subsidy, a water supplier or community must show that they:

- are a legal entity and will own the water supply
- have the appropriate DI to be eligible for a drinking-water subsidy
- have an approved public health risk management plan
- have optimised their water supply (see 5.1.1 below)
- have developed a sustainability plan (see 5.1.2 below)
- have received technical advice from their DHB public health unit
- have included a report on their application from their DHB public health unit.

Applicants for drinking-water subsidies will need to demonstrate they have received technical advice on their drinking-water supply from their District Health Board public health unit, and that the operation of the supply has been 'optimised' and is sustainable. Contact details for local public health units are shown in Appendix 1.

5.1.1 Optimisation plan

Optimisation of a supply involves making sure that the management, operation and any equipment used in the supply is functioning as well as it can. The optimisation plan will ensure that the most economic systems and processes changes are in place to address as many as possible of the quality and risk issues identified in the small water supplier's public health risk management plan. Once this is done, the public health risk management plan and the optimisation plan will identify any capital works that might be needed to address the remaining risks. At this point, the Ministry of Health might consider an application for a drinking-water subsidy.

5.1.2 Sustainability plan

The **sustainability plan** will identify all issues relating to the future viability and sustainability of the water supply. This will include details of the ownership and legal structure of the water supply and the ongoing operational and maintenance costs and how these will be funded. It is about how the small water supply maintains its newly optimised supply into the future and, more importantly, how it sustains its supply once the public money has been spent to upgrade it. The sustainability plan must demonstrate how the Government's investment will be protected.

The sustainability plan must consider:

- financial sustainability
- operational sustainability

- governance and management sustainability.

Financial sustainability will require the water supplier to produce a financial plan, showing how income will be generated from the supply users, for example, applying a fixed charge, a variable charge, a mixture of the two or other sources of funding. The financial plan also needs to show the maintenance costs, including all recurring expenditure and large but infrequent expenditure.

The plan needs to demonstrate that enough money will be available to keep the supply going and to maintain the infrastructure funded from subsidies. It needs to demonstrate that facilities and infrastructure purchased with drinking-water subsidy funding will be properly maintained and will continue to be used to benefit the community for a minimum of 10 years.

The plan must also demonstrate operational sustainability. For example, if volunteers are to be used, the plan must identify a reliable volunteer group that is prepared to run the system and outline training arrangements. Adequate, simple, operational and quality manuals must be available for all volunteers to reference. Manufacturer's manuals, where applicable, also need to be available.

Operational and governance, and management sustainability go hand in hand. A good governance and management programme will ensure the ongoing viability of the drinking-water supply. Community-owned supplies will need to demonstrate that they have sound governance and management arrangements. For example, one possible arrangement is for the water supply to be run as an incorporated society, with appropriate termination procedures specified in the society's rules. Governance and management plans must identify staff, secretarial support, and so forth.

The governance arrangements must also detail who will maintain the water supply systems and how those individuals will be trained and supported to ensure the operational requirements are met.

5.2 Making an application

Public health unit staff may assist drinking-water suppliers in preparing their applications for subsidies. All applications need to be reviewed by the public health unit before being sent to the Ministry of Health and must include a copy of the public health unit's report. Application forms are available from the respective DHB public health unit (see the example application form provided as Appendix 2). The Ministry of Health will acknowledge receipt of any application.

Applications can be made under the following categories (see section 3.1 for further information about staged applications):

- investigations
- capital works and/or equipment.

All applications must include the following information:

- the applicant's contact details
- WINZ codes for an existing supply (showing that it is registered) or an undertaking to register for a new supply
- background information about the supply, including history and details of the water source
- demographics, size and the DI for the supply's community
- details of the ownership and governance for the supply
- details of the management and responsibility for the operation of the supply (including qualifications and training of staff, time spent on water supply work, etc)
- details of any community consultation
- details of any existing treatment equipment
- sampling/monitoring results
- the public health risk management plan
- the optimisation plan
- the sustainability plan
- a description of how the subsidy funding would be spent, including estimates or quotes from product and service suppliers
- a preliminary design report, including plans and estimates
- information on the options considered for the capital works or equipment, the reasons the preferred option was selected and why it is considered best value for money
- details of how the water supplier will meet their share of the costs
- the public health unit's report on the supply and the application
- any further information requested by the public health unit or the Ministry of Health.

The public health unit's report on the supply and application will outline how the supply meets the eligibility criteria and prerequisites. The report will discuss the outcome of the technical advice provided to the applicant and will comment on the applicant's optimisation plan, public health risk management plan and sustainability plan. The report will also outline how the proposed application, if successful, would contribute to the provision of a safe drinking-water supply for the community.

5.3 Assessing applications

After the close of applications on 28 February, there will be up to two months period when Ministry of Health officials will review all applications and, during this stage, further clarifying information may be sought from the applicant.

The Ministry of Health will rank all applications so that the most deserving are funded first. The ranking score will be calculated by giving each application a mark relating to the community's ability to contribute financially towards the supply and the public health risks of the supply. The marks from these two categories will be added together to provide a total ranking score.

The ability to contribute financially relates to the DI of the community seeking the subsidy. For example, a community that has a DI of 7 will score 7 marks towards their ranking score total; a community with a DI of 10 will score 10 marks towards their ranking score.

The public health risks of the supply will be calculated from Table 2 below.

Table 2: Calculation of marks for risks to health

Risks to health present in supply	Marks
Source water (contaminant source):	
• Secure groundwater	+0
• Groundwater that is more than 10 m deep	+5
• Rainwater	+10
• Lake/large open reservoir	+15
• Shallow groundwater/spring that is less than 10 m deep	+15
• Stream/river through bushed catchment	+15
• Stream/river/open reservoir through or in an agricultural catchment	+20
Preventive/mitigating measures (contaminant removal) already in place	
• Protozoal and bacterial removal/inactivation to the drinking-water standards	-20
• Bacterial removal/inactivation to the drinking-water standards	-10
• Pre-treatment storage/selective abstraction	-5
• Source protection measures	-5
• Monitoring programme (eg, instrumentation, lab testing) to meet the standards	-3

Risk to health score = source water risk – sum of preventive measures.

Note: Any risk less than 0 will be recorded as 0.

The ranking score is calculated as follows:

$$\text{Deprivation Index} + \text{Risks to Health Score} = \text{Ranking Score}$$

The Ministry of Health will give a 'best-fit' match to any water supplies that do not fit exactly into the categories.

Applicants will be advised in writing of the ranking score calculated for their application once the Ministry of Health has completed the calculation.

All applications will be ranked from the highest scoring to the lowest. The \$10 million available each year will be allocated to the applications from the highest scoring to the lowest until all of the funding available for that application period is allocated.

The Ministry of Health will make recommendations on the applications for the Sanitary Works Technical Advisory Committee to consider. The committee will then advise the Minister of Health on the recommended applications for drinking-water subsidies.

Applicants will be advised in writing of the Minister of Health's decision on their application.

Water suppliers may make more than one application for drinking-water subsidies regardless of the outcome of any previous application.

Any applications that do not receive funding in any year will not automatically be considered for funding in the next year, unless the applicant indicates that they wish their application to be reconsidered and have no changes to make to that application.

6 Payment of Drinking-water Subsidies

Once an application for a drinking-water subsidy is approved, the Ministry of Health will enter into an agreement with the applicant to enable payment to be made as the works are completed.

While the agreement is between the Ministry and the water supplier, the public health unit will be the key contact point, facilitator for accessing technical assistance and other information, and to answer questions about reporting and invoicing. The public Health Unit will hold a copy of the agreement to ensure that they are aware of when works are scheduled to be completed, when they will need to provide reports, and to maintain an awareness of the projects in their area so they can provide informed support. However, it is the applicant's responsibility to meet the requirements of the agreement.

All water suppliers receiving a drinking-water subsidy will need to demonstrate that the facilities or infrastructure purchased with the assistance of the drinking-water subsidy will be properly maintained and will continue to be used to benefit the community. This will be demonstrated through the public health risk management plan and sustainability plan.

Successful applicants will have agreed funding reserved for up to two years, during which time, the applicants must secure any required resource consents. If resource consents cannot be obtained or the works cannot be completed in this time, the applicant must apply in writing to the Ministry of Health for an extension to the reserve period. Any extension would be considered on a case-by-case basis.

The agreement between the Ministry of Health and the applicant will identify what payments will be made for the specific activities outlined in the application and the timeframe for work. The applicant will organise for the works or activities to be undertaken and properly supervised. The applicant will report progress to their public health unit at agreed times and provide the public health unit with a report on the works and their commissioning upon their completion.

Before any invoices are sent to the Ministry of Health, the applicant will need to get a report from the public health unit confirming that the work has been completed to an appropriate standard. The public health unit will report on progress against the contract milestones, and the applicant must provide these reports to the Ministry of Health with all invoices, along with any GST receipts for work undertaken by contractors and equipment suppliers (where applicable).

Appendix 1: Contact Details for Public Health Units

When seeking information, please contact your local District Health Board public health unit and ask to speak to someone about drinking-water subsidies.

Area	Public health unit	Address	Phone
Northland	Child, Youth, Maternal, Public Health & Dental Services Northland District Health Board	Dairy House Porowini Avenue Private Bag 9742 Whangarei 0148	Whangarei (09) 430 4100 Kerikeri (09) 537 4342 Kaitiaki (09) 408 0010
Auckland	Auckland Regional Public Health Service	Cornwall Complex Building 15, 40 Claude Road Greenlane Private Bag 92 605 Symonds Street Auckland 1035	(09) 623 4600
Waikato Northern Ruapehu	Population Health Services Waikato District Health Board	Level 4, Hugh Monckton Trust Building Cnr Rostrevor and Harwood Streets PO Box 505 Waikato Mail Centre Hamilton 3240	(07) 838 2569
Eastern Bay of Plenty	Toi Te Ora – Public Health Service Bay of Plenty District Health Board	Stewart Street PO Box 241 Whakatane 3158	(07) 306 0847
Tauranga	Toi Te Ora – Public Health Service Bay of Plenty District Health Board	Level 4, Westpac Building 2 Devonport Road PO Box 2121 Tauranga 3140	(07) 577 3774
Rotorua Taupo	Toi Te Ora – Public Health Service Bay of Plenty District Health Board	1166 Amohau Street PO Box 12060 Rotorua 3010	(07) 349 3520
Gisborne Tairāwhiti	Healthy Environments Planning, Funding & Population Health Te Puna Waiora Tairāwhiti District Health Board	3rd Floor Morris Adair Building Gisborne Hospital 421 Ormond Road Private Bag 7001 Gisborne 4040	(06) 869 0570
Taranaki	Public Health Unit Taranaki District Health Board	Barrett Building Tukapa Street Private Bag 2016 New Plymouth 4342	(06) 753 7799

Area	Public health unit	Address	Phone
Hawke's Bay Chatham Islands	Public Health Unit Hawke's Bay District Health Board	Napier Health Centre 76 Wellesley Road PO Box 447 Napier 4140	(06) 834 1815
Manawatu	Public Health Unit MidCentral District Health Board	Community Health Village Palmerston North Hospital PO Box 11036 Palmerston North 4440	(06) 350 9110
Whanganui Southern Ruapehu	Public Health Centre MidCentral District Health Board	Lambie Hostel Wanganui Hospital Private Bag 3003 Whanganui 4540	(06) 348 1775
Wairarapa Wellington Lower Hutt Kapiti Coast	Regional Public Health Hutt Valley District Health Board	Level 1 Community Health Building Hutt Hospital Private Bag 31 907 Lower Hutt 5040	(04) 570 9002
Nelson Tasman	Nelson Marlborough Public Health Service Nelson Marlborough District Health Board	Nelson Office 36 Franklin Street PO Box 647 Nelson 7040	(03) 546 1537
Marlborough	Nelson Marlborough Public Health Service Nelson Marlborough District Health Board	Blenheim Office Wairau Hospital Hospital Road PO Box 46 Blenheim 7240	(03) 520 9914
Canterbury	Community and Public Health Canterbury District Health Board	Datacom House 76 Chester Street East PO Box 1475 Christchurch Mail Centre Christchurch 8140	(03) 364 1777
South Canterbury	Community and Public Health	18 Woolcombe Street PO Box 510 Timaru 7940	(03) 687 2600
West Coast	Community and Public Health	3 Tarapuhi Street PO Box 443 Greymouth 7840	(03) 768 1160
Otago	Public Health South Southern District Health Board	Main Block Level 2 Wakari Hospital Tajeri Rd PO Box 5144 Moray Place Dunedin 9058	(03) 476 9800
Southland	Public Health South Southern District Health Board	92 Spey Street PO Box 1601 Invercargill 9840	(03) 211 0900

Area	Public health unit	Address	Phone
Central Otago Queenstown Lakes	Public Health South Southern District Health Board	Building 7, Level 3, Suite 2 Remarkables Park Town Centre Hawthorne Drive PO Box 2180 Frankton Queenstown 9349	(03) 450 9156

Appendix 2: Example Application Form

Drinking-water Subsidy Application



This application is for:

<input type="checkbox"/>	an existing supply
<input type="checkbox"/>	OR
<input type="checkbox"/>	a new supply.

This application is for:

<input type="checkbox"/>	Stage 1
<input type="checkbox"/>	Stage 2

of a two-stage application.

An application for funding does not necessarily mean the funding will be approved. Applications will not be considered unless supported by a report from your local District Health Board (DHB) public health unit.

If you need help filling in this form, please contact your local DHB public health unit.

What do I need to do?

- Ensure that you have read and understand the *Revised Criteria for Drinking-water Subsidies*. This document is available online at <http://www.moh.govt.nz>
- Contact your local DHB public health unit to seek technical advice and confirm your deprivation index (or score) (DI).
- Review the checklist below to ensure that you are able to provide all the required documentation to support your application.
- Ensure that you have clarified the legal status of the entity applying for funding. For example are you a territorial authority, regional council, limited liability company, incorporated society, community group, iwi authority, partnership or trust?
- Fill in parts A, B and C of this form.
- Read and sign Part D of this form.
- Send your completed application to:

Drinking-water Assistance Programme
Ministry of Health
PO Box 5013
Wellington 6145

by **28 February**.

Checklist

Information that needs to be provided as part of the application process. (If you provide additional information, please state the question number to which that additional information applies.)

Please include supporting copies of information as attachments at the end of this application form.

- Certified copies indicating your organisation's legal status: eg, local authority, limited liability company, incorporated society, trust, community group, iwi authority or partnership (see question 8)
- Full project plan and budget (for applications greater than \$10,000.00) (see questions 12–14, 18, 22)
- An approved public health risk management plan
- Other supporting information (plans, schematics, maps, consent approvals, etc) (see questions 9, 12, 16, 19, 22)
- Optimisation plan
- Sustainability plan (see questions 17, 19–20)
- Land ownership details (see question 11)
- Supplier quotes (see questions 13 and 14)
- Public Health Unit Report
- GST number (see question 5)

The Ministry of Health must received applications for drinking-water subsidies **no later than 28 February**. Applicants will be informed of the funding decision approximately three months after that date.

NO electronic applications will be accepted. Please provide two signed copies of all application material (photocopies acceptable).

The Ministry of Health will send all applicants a letter confirming receipt of their application.

If your application is accepted, the information you provide in this form will be the basis for your formal funding agreement and will be used to monitor your progress. Please ensure that all information provided is as accurate as possible.

Funding applications are assessed by the Ministry of Health and by the Sanitary Works Technical Advisory Committee (SAWTAC), which makes recommendations to the Minister of Health on whether to accept all or part of an application.

Part A: Water supply details

1. Name of water supply
(existing water supplies must be included on the Ministry of Health's Register of Community Drinking-water Supplies in New Zealand)
2. Community code
(sourced from the Register of Community Drinking-water Supplies in New Zealand)
3. Name of legal owner of water supply
- 3a. Population/size of community served by water supply
(this information should be cross-referenced to census figures)
Normal permanent residential population
Maximum population
- 3b. Street address
4. Postal address
5. GST number
6. Name of key contact person
7. Contact details for key contact person
Work phone
Fax phone
DDI phone
Mobile phone
Email address

8. Your organisation's legal status
(attach certified copies of documents at the end of this application form)

A local authority

Limited liability company

A registered charitable trust

Other legal entity (eg, Māori trust/ authority,
incorporated society or partnership) (list below)

9. Are the water supply assets currently insured?

Yes (list what is insured)

No

Name of insurance company

10. The community's deprivation index or score (DI)
(see your local DHB public health unit for assistance)

11. Who owns the land that the following water supply components are located on?
(Attach certified copies of certificates of title, other ownership papers, easements, any lease or land use agreements, Crown
gazette notices, or Māori land order)

11a Source (bore, well or stream abstraction point)

11b Treatment plant

11c Distribution system (include relevant maps
and clearly show ownership details of the land
used in the distribution system)

12. Provide information here about any resource or building consents required for your drinking-
water supply.

12a Provide details on any resource consents
currently held (or being sought) that relate to
the drinking-water supply (eg, type of consent,
what it is for, expiry date, etc)

12b Provide details of any resource or building
consents that will be required if drinking-water
subsidy funding is provided for this project (eg,
the type of consent required, what it is for and
the name of the consent authority)

Part B: Project costs

Provide details of the costs of undertaking the project. Provide supporting evidence for your costs, for example, written quotes or estimates.

13. What is the total forecasted cost of the project and what amount of this total is being requested from the subsidy fund?

Total forecasted project cost \$ (excluding GST)	Amount requested from subsidy fund \$ (excluding GST)	Community contribution (including in-kind contributions) \$ (excluding GST)
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14. Enter the projected breakdown and costs for your project in the table below. We need to know how any funding granted will be spent. The item headings are an indication only; however, they should be linked to the risks highlighted in the public health risk management plan. Add any other project costs under 'Other' as appropriate.

Project cost items	Brief description	Costs \$ (excluding GST)	Requested subsidy contribution total cost \$ (excluding GST)	Community contribution (including in-kind) \$ (excluding GST)
Raw water source works				
Conveyance from source to treatment plant				
Pre-treatment settling or raw water storage				
Treatment plant				
Reservoirs				
Instrumentation				
Remote monitoring or alarm equipment				
Distribution system installation/upgrade				
Other water supply equipment identified as necessary in the public health risk management plan				
Other (specify)				
TOTAL				

15. Provide a breakdown of your organisation's contribution as above (question 14) to indicate whether this is cash or In-kind contribution and what period of the project this contribution covers.

Your organisation needs to contribute to the cost of the project. Cash contributions could be made from cash reserves. In-kind contributions could include volunteers' time or support (donation or supplies) from local businesses. For the purposes of this question, organisational contribution does not include project management. Use the item headings from the above table as appropriate. Provide a dollar value for the In-kind contribution.

Contribution item	In-kind contribution \$ (excluding GST)	Cash contribution \$ (excluding GST)
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TOTAL

16. Provide a breakdown of any other funding related to this project that you have applied for. Failure to disclose may result in your application being disqualified. All cash costs listed should exclude GST.

Funding agency	Contribution value \$ (excluding GST)	Is the funding confirmed?
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17. How will your organisation fund the ongoing operational costs once the project has been completed?
Assessment of eligibility for funding will take into account the ongoing sustainability of the water supply and its independence from government funding.

Part C: Project details

If you have any additional information that does not fit in this template, you can include it as an attachment at the end of this application.

18. Supply detailed summary information on the project that your organisation wants to undertake. The project summary should link back to the risks identified in the public health risk management plan and include a preliminary design report that covers plans and estimates.

19. Briefly describe how the project will be managed. Include a detailed work or action plan for the project that clearly shows the project stages, together with the project start and completion dates, and provides details of management and responsibilities for the various stages, listing staff involved, along with their relevant qualifications, etc.

20. Briefly describe the history of the water supply.

21. Briefly describe the current drinking-water supply set up.
Include details of existing treatment equipment and sampling/monitoring results.

22. Briefly describe the proposed project and the improvements to the supply that will be made if your application is successful.
Include reasons for why the preferred options were selected and why these options are considered the best value for money.

23. How will you monitor the progress of the project? Indicate target dates by which specific outcomes/goals will be achieved.
State how the project will be evaluated in terms of achieving its outcomes/goals and providing value for money.

24. Who has been consulted in the planning of the project, for example, the local community and/or council?

25. What concerns, if any, were raised in the consultation? How were these concerns addressed?

26. How will you keep the people you consulted involved as the project progresses?

Part D: Declaration of understanding

The decision to apply for funding as well as the contents of this application has been approved by the organisation applying for funding.

This application is true and correct to the best of my/our knowledge, and our organisation:

- has read and understood the *Revised Criteria for Drinking-water Subsidies*
- is eligible to apply for a subsidy
- agree to become registered in the Ministry of Health Register of Community Drinking-water Supplies in New Zealand if proposing a new supply
- has attached to this application all relevant supporting documents as outlined in the checklist on page 1
- has the skills and experience or necessary support to manage this project
- has no outstanding financial issues that may affect the assessment of this application (ie, it is credit worthy)
- is not insolvent and is not operated by a statutory manager
- is not receiving funding for this or similar projects from other government or non-governmental agencies other than those specified in this application
- has no outstanding issues or disputes with other parties that would impede the progress of this application
- is the legal owner of the supply

I/We understand and agree that, before granting any funds, the Ministry of Health may undertake further checks in relation to project management experience, credit worthiness, referees, funding with other schemes and/or any possible issues. Should referee checks be considered necessary, I/we will be advised in advance of these checks being undertaken.

I/We understand that the information is collected to help the Ministry of Health to assess my/our application for drinking-water subsidy funding. The information I/we give in this application is collected, and will be held, by the Ministry of Health.

I/We understand that I am not/we are not required to give the Ministry of Health any information; but if I/we do not give the Ministry of Health all the information asked for to assess the application, the application may be declined.

Under the Privacy Act 1993, I/we have the right to ask to see all information that the Ministry of Health holds about me/us and to ask the Ministry of Health to correct that information where appropriate.

The Ministry of Health may disclose information about me/us to its agents, contractors or other parties for the purpose of assessing the appropriateness of my/our application.

The Ministry of Health may also disclose information about me/us to credit reference agencies for the purpose of obtaining a credit report on me/us.

The Ministry of Health may obtain information and make such enquiries about me/us as it considers warranted from any source, including its agents, contractors and credit reference agencies for the purpose of assessing the appropriateness of my/our application.

Official Information Act 1982

Written funding applications or comments provided to the Ministry of Health will be subject to the Official Information Act 1982 (OIA). The OIA requires the information to be made available unless there is good reason, pursuant to the OIA, to withhold the information, and that good reason outweighs the public interest in making the information available.

Authorised signatory or signatories

The person(s) completing this application form has/have the authority to act on behalf of the applicant and is/are authorised to sign this application. (a maximum of two signatories can be nominated)

Name
(use block capitals)

Title or designation

Date

Signature

Name
(use block capitals)

Title or designation

Date

Signature