



3.4 **Target Number** – What is the anticipated number of beneficiaries who will be targeted and what is the frequency of service to each identified beneficiary group/community and the total duration thereof (not exceeding three months from commencement)?

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**3.5 Details of the Implementation Plan and Operating Model:**

3.5.1 If you are directly implementing a cooked meal and distribution operation, please describe your food handling processes from sourcing to transportation, storage, preparation and delivery **OR**

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3.5.2 If you are providing raw materials to a network of community based feeding kitchens and the management thereof, please provide details on how this operation will be executed: sourcing and distribution of products, ensuring safe food handling processes and the supervision of the network of food preparation partners.

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3.5.3 Please provide a description of the meals that are planned to be served to beneficiaries: e.g. Breakfast (cereal, sandwiches, etc.); Lunch (sandwiches, spaghetti & mince, etc.); Dinner (samb & beans, mutton/beef stew & rice, etc.)

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3.5.4 Please provide details of the mechanics of the on-site distribution of cooked meals to targeted beneficiaries: how, who, where, when

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3.5.5 Please describe your beneficiary engagement processes: How will you identify targeted beneficiaries, what channels will you use to communicate messages about the initiative, how will you handle feedback from beneficiaries, what other stakeholders will participate in your engagement in communities.

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3.5.6 This programme is executed against the reality of a health pandemic in the country. Please provide details of the precautionary health and safety measures that will be implemented within 1) your operations and your team(s) during execution and 2) your targeted beneficiary groups/community during distribution.

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3.5.7 Please provide details on the overall management of supervision of your operational teams/staff/volunteers during implementation including an overview of their broad roles and responsibilities.

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3.5.8 Please include a **PROJECT SCHEDULE** for the roll out the process providing details of the key activities and the delivery dates. Please confirm that this is attached in your submission.

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3.6 **Expenditure Budget** - What is the anticipated expenditure to be incurred on this specific project or programme and what will the money be spent on?

**NOTE:** Grant-in-Aid funds received from the city cannot be used to fund salaries and wages, municipal service accounts, telephone accounts, general administration expenses, etc. Any Grant-in-Aid funding that your organisation may receive from the City must only be used to fund expenditure directly related to the approved project or programme ensuring that the target beneficiaries receive the full benefit of the Grant-in-Aid which will not happen if any funds are misused or are used to fund the types of expenditure mentioned. Your organisation must fund your own normal operating costs and any structures and other improvements made to your property and / or buildings. Your organisation must be properly registered,

established and viable and provide the City with copies of your audited Annual Financial Statements where Grant-in-Aid from the City exceed R50 000 and an approved Income and Expenditure statement where the Grant-in-Aid are less than R50 000. The minimum amount of Grant-in-Aid funding that may be applied for is R15 000 (Fifteen Thousand Rand). Please include the average cost per head to be spent on each meal for the intended number of beneficiaries to be reached and the frequency and duration thereof e.g. R10 per head for breakfast for 300 beneficiaries 5 days a week for 3 months.

No	Cost Details (break down of each cost item including the general operating costs not exceeding 7% of the total project cost)	Amount (R)
(i)		
(ii)		
(iii)		
(iv)		
(v)		
(vi)		
(vii)		
(viii)		
(ix)		
(x)		
<b>TOTAL BUDGET - EXPENDITURE</b>		

3.7 **Income Budget: - (if applicable)** What are the anticipated income sources for the specific project or programme in order to fund the expenditure in 3.5?

No	Sources	Amount (R)
3.7.1	Grant-in-Aid requested from city for this project / programme (Minimum amount that may be applied for is R15 000 – (Fifteen Thousand Rand)	
3.7.2	Own fund raising by your organisation	
3.7.3	Other sources (specify below) Please provide details and identify the source of the funds e.g. National Government, the Provincial Government: Western Cape, Private Donors and donor organisations etc. and including other sources of funding that your organisation may receive from the City	
(i)		
(ii)		
(iii)		
(iv)		
(v)		
(vi)		
<b>TOTAL BUDGET - INCOME NB. (MUST EQUAL total expenditure in 3.6)</b>		

<p><b>4.</b></p>	<p><b>ADMINISTRATION: -</b></p> <p>4.1 <b>Records</b> - What records are kept of the beneficiaries who will benefit from this project? These records should be properly kept in order to ensure accountability, accuracy, transparency and equity and should confirm that the beneficiaries are part of the target group and that the targets have been met effectively and efficiently and confirm that the project or programme is being carried out in a professional manner.</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><b>5.</b></p>	<p><b>Banking Details of Organisation: -</b></p> <p>5.1 Bank Account Details: (These details must be the same as those recorded on the City's SCM Vendor database where your organisation is registered as a supplier. Organisations not yet registered on the SCM Vendor Data Base must make application to the SCM department for registration. The SCM department can be contacted using the contact details provided in the Grant-in-Aid application form.)</p> <p>Bank: .....</p> <p>Branch.....</p> <p>Branch Code.....</p> <p>Account Number.....</p> <p>Name of Account Holder: (Organisation name on City's SCM Vendor database refer Item 2.3.2 in application form)</p> <p>.....</p> <p>.....</p>
<p><b>6.</b></p>	<p><b>Income and Expenditure records: -</b></p> <p>6.1 Original invoices, vouchers, cheques, cash slips, receipts etc. Confirming and detailing expenditure on the project. Please confirm that your organisation keeps proper records of your expenditure and income and that copies will be submitted to the City in terms of the MOA (Annexure "B").</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>6.2 Expenditure Report Template (Annexure "A3") Please confirm that these reports will be completed and submitted to the City as required in terms of Paragraph 4.18.2 of the conditions as set out in the Application Form (Annexure "A1") and that your organisation is able to properly complete the reports.</p> <p>.....</p> <p>.....</p>

	<p>6.3 A copy of your organisation's Income and Expenditure statement must be attached to this application if the Grant-in-Aid amount applied for is R50 000 or less. Such statement must be signed by the responsible official who must also confirm that such statement was tabled at your organisation's annual general meeting. Please confirm that this has been done and ensure that the statement is attached hereto.</p> <p>.....</p> <p>.....</p> <p>6.4 Your organisation's latest Audited Annual Financial Statements must be attached to this application for a Grant-in-Aid in terms of the MOA where the Grant-in-Aid amount applied for exceeds R50 000.</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><b>7.</b></p>	<p><b>Financial Management and Control</b></p> <p>7.1 What internal, cash and expenditure controls does your organisation have in place to ensure that all Grant-in-Aid funds received and the utilisation of such Grant-in-Aid are properly accounted for?</p> <p>.....</p> <p>.....</p> <p>7.2 What is your cheque signing policy i.e. are two or more signatories required to sign cheques? Provide details.</p> <p>.....</p> <p>.....</p> <p><b>7.3 Your organisation's Constitution</b></p> <p>7.3.1 What is the sole or principal object of your organisation as set out in its Constitution?</p> <p>.....</p> <p>.....</p> <p>7.3.2 What does your organisation's Constitution provide regarding the distribution or disposal of assets upon dissolution?</p> <p>.....</p> <p>.....</p> <p>.....</p> <p>.....</p>
<p><b>8.</b></p>	<p><b>Property and operational requirements</b></p> <p>8.1 What type of property, building, facility or structure is required to carry out the project or programme?</p> <p>.....</p> <p>.....</p>

8.2 Does your Organisation own, lease or hire a suitable property, building, facility or structure as required in 8.1 that will enable it to effectively carry out the project or programme?

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8.3 Where the facility or property is leased or hired, is the period of lease/hire sufficient to enable completion of the project? If yes, please provide details of the lease period to confirm this.

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8.3.1 Does the leased or hired property, building, facility or structure belong to the City?

YES	<input type="checkbox"/>	NO	<input type="checkbox"/>
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8.3.1.1 If **YES**, then a copy of the lease agreement with the City should be attached hereto and also a copy of your organisations current municipal account and lease rental account. Please ensure that the relevant documents are attached.

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8.3.1.2 If **No**, please advise below who is responsible for paying the monthly municipal account (where applicable) for rates and services rendered by the City? If the landlord or registered owner is responsible for payment, then the applicant must attach a copy of the latest municipal account issued to such owner.

**Details of the Municipal Account Holder: -**

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Please ensure that a copy of the latest account is attached hereto.

8.4 Confirm that the land use of the property to be utilised for the project is correctly zoned in terms of the applicable zoning scheme.

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8.4.1 Where your organisation leases the property does the lease agreement (with the City or others) give your organisation the necessary permission in order to carry out the proposed project on the property?

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8.5	What furniture, equipment and/or utensils (e.g. desks, stoves, kitchen utensils, etc.) will your organisation need to carry out the project with and confirm whether these items of equipment and/or utensils are available? ..... ..... ..... ..... .....
8.6	If your Organisation does not own the required furniture, equipment, and/or utensils referred to in 8.5, how will it acquire the necessary items? Confirm whether or not the Grant-in-Aid funding applied for will be utilised to acquire those items. If yes then these details should also be reflected in the expenditure budget under 3.6 above, noting that these costs cannot exceed <b>7% of the total project cost</b> . It should also be noted that not all of the items or requirements your organisation listed under 8.5 above will qualify for Grant-in-Aid funding and you will be advised accordingly. ..... ..... ..... ..... ..... ..... .....
9.3	How will the success or impact of your project/programme be measured? What evidence will be supplied? ..... ..... ..... .....
9.4	How can this information be verified? ..... .....

<b>Duly authorised person of the organisation:</b>	
Full Name:	.....
RSA ID Number	.....
Position	.....
Signature	.....



**Please Note:** Copies of the City's Grant-in-Aid Policy are available on request from the Subcouncil or Project Manager's office at the address indicated in the Application Form under section 1 above

**For Official Use Only**

*(To be completed by Subcouncil or Project manager when completed application is received from applicant)*

Subcouncil number and name: - .....

Subcouncil Manager: - .....

Line Department: - .....

Project Manager: - .....

Ref No: - .....

Date Application Received: - .....

Signature: - .....

(Subcouncil or Project Manager)

Date stamp of  
Subcouncil / Line  
Department

**For Official Use Only**

*(To be completed by Subcouncil or Project manager when Council has approved the Grant-in-Aid and before the signing of the MOA – Attach this completed Annexure "A2" to the signed MOA)*

The Council on ..... (ddmmyy) approved the Grant-in-Aid of R ..... to the organisation or body identified in this Business and Project Plan and the Grant-in-Aid funds may only be used for the following purposes:

1. ....
2. ....
3. ....
4. ....
5. ....

Subcouncil Manager: - .....

Project Manager: - .....

Signature: - .....

(Subcouncil or Project Manager)