

Application for Assistance Clean Drinking Water-Water Hand Pump - HF510/ **District Operations**

False information or incomplete form may cause rejection of

Leadquarters

34	01
CA.	95056
15	4-3282

er Print 2. Name of Applicant: _ 4. Applicant's National ID Card No: ___ 5. Date of (Attach a photocopy) 6. Complete Address: _ 7. Is water hand pump or another alternate water source exist within or no 7.1. If yes which is source and how far is it: ___ 8. Approx. water level: ______ 9. Status of water nearer 10. Does Applicant work: Full Time Part Time 12. Has Applicant or family member received any finage 13. If yes, how much? ____ ☐ No 14. Father or Husband's Name: _ 16. Total Family Members: ___ 18. Total Monthly Family Income: 20. Is the Applicant or family aff/ 21. Does family own home/ 22. Two references Tel. Numbers & E-mail Address is form, I hereby agree that Hidaya Foundation can verify ficant will qualify to receive assistance. I further certify that I any kind. I understand that if any time Hidaya Foundation finds or criminal activity assistance will be immediately stopped. FICE USE ONLY n Form HF510Inv and attach to this document ☐ No By whom? __ What date? ___ e or Country Manager? ☐ Yes Was a ☐ No What date? ____ Regional Dir __ Date: ___



Project Proposal Clean Drinking Water - Water Hand Pump – HF510PPl District Operations

Headquarters
PO Box 5481
Santa Clara, CA 95056
No: (408) 244-3282
ail@hidaya.org

Project Prop

Clean Drinking Water
Environm
(Insert Occasio)

(Insert Occasio (Insert D (ar)

Atted By: ame of Person)

antry Manager idaya Foundation Treasurer

Hidaya Foundation

Date: _____

Date: _____



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Please Note: Hidaya Foundation is a charitable organization. It is Hidaya Foundation's firm policy projects or activities that are politically or religiously motivated. Hidaya Foundation only supports improve the society at large, and directly benefit people at individual or collective levels.

ot fund or support at impact and

1.0 Project Objective

The purpose of this project is to provide the drinking and clean water our society they are unable to install their own water hand pumps be so they can be productive members of society as they grow. Thos and there is non availability of potable water

2.0 Project Summary

Project details / questions	Py
Proposed project name	
Occasion / Month / Year	
Objective of the project	
Total funds being requested in USD (\$)	
Total funds in local currency being requested	
Expected Currency Exchange Rate on the d	
Conversion	
Source of funds (guidelines for each my	Zakat 🗆
Estimated project start date	
Estimated project completion date	
Type of assistance to be provide	
Total number of beneficiari	
Cities/Towns/Villages w/	
executed.	
Project/Program M	
and e-mail addre	
Backup Proje	
and e-mail	
Name(s)	
purch	
Ny	

ery recipient; keep one copy at the district office and submit original form

ection in detail. It is suggested that the requestor write the details as if he/she is proval from a financial institution

bught process behind each section will determine the eligibility and approval process.



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Special emphasis should be given to project planning, project management, review processes and budget details to ensure that the requestor can convince Hidaya Fo through every detail in his/her mind and spelled it out in writing

ion and reporting

- Photographs and/or Videos of the distribution at various times/days must be
- Genuine original receipts for all purchased material must be submitted, District Office's local records
- For Banner size, wording, color and font, contact HQ
- District office should keep in mind that they may be required to materials/commodities they intend to purchase. Please note, supplier. The reputation of the supplier and product quality decision.
- Make sure to read through the Project Completion Rep successfully execute the project and capture all the p

e has thought

bu can

q to

3.0 Project Planning

Provide detailed responses to the answer each question with ade the project will be executed),

ace as needed to derstand how well

- 3.1. Project Management
 - a. Who will manage the
 - Who will be the b
 - c. How many su project in a
 - d. What y

o they have?

flunteers) will be used to help execute the

and presented to HQ? (Every 15 days, 1 month, 3 months or 6

sented to HQ? (Presentation, Overview or Interim report?)

and what are their socio-economic conditions?

es be selected?



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c. How will the field investigation be performed for all beneficiaries to judy Hidaya Foundation guidelines?

eligibility under

- d. How many total Poor will benefit from this project?
- e. Will more Poor's added to the project as they will be identified?
- 3.4. Preparation, Logistics and Distribution
 - a. What will be the logistics for installation of hand pump? H installation be ensured?
 - b. What items will be used in installation? (Please give co
 - c. Where will the installation take place? (Beneficiary
 - d. What security measures will be taken durively well as that of hand pump?

on team as

- 3.5. Purchasing
 - a. What material(s) will be purchased?
 - b. What material(s) will be bought provide the name(s) of the other bases.

ng a bid from and for what

m other areas? Please

c. What are the names of material?

Note: The documentation for telephone number, and co

ier (with the business name, address, nasing.

- 3.6. Project Tasks
 - a. List all the
 - b. Identif
- 3.7. Proj

a.

do you expect to face during the life of this project (examples: as, groups or parties?)

pect to face in implementing this project?

vide any other information or feedback that you feel will help Hidaya ess for future projects.



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Numbe Pumy

4.0 Average Project Costs

4.1. Cost of Materials / Commodities:

S.	List of items actually	Number of items	Price Per	Sub Total
No	purchased		Unit	
1	Pipe 1.4 inch (Plastic)			
2	Pipe 1.4 inch (Steel)			
3	Filter boring			
4	Plastic Taps			
5	Rope			
6	Water hand pump			
	machine			
7	Boring rate.			
8	Threading			
9	Socket.			
10	Pecans/seal			
11	Mason			7
12	Labor			
13	Bricks			
14	Cement.			
15	Hill sand/			
16	Concrete			
17	Color			
	Total		/	

4.2. Overhead Cost: (Fill in only the line iter

	List of other cost items in support of the	Comments
a	District office amortization cost over 5	
b	Loading, Unloading and transportatio	
c	Packing Materials and Plastic Bags	
d	Packaging Labor compensation /	
e	Distribution / transportation co	
f	Distribution Helpers	
g	Photographs and related c	
h	Over head charges	
i	Documentation / copy	
j	Banners and adverti	
k	Postage	
1	Conveyance	
m	Salary of em	
n	Other	
	Total O	

4.3. T

.00 Local Currency 0.00 = \$0.00 \$.00



HF510PP

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6

I hereby certify that I will make sure that wrong elements of society (those who are involve activities) will not benefit from Hidaya Foundation's humanitarian project.	and /or terrorist
Project Manager's Name:Sign	
Date:Title:	
Reviewed and approved:	
Operations Manager's Name:	
Signature:	