

Community Area Grant Application Form

Please ensure that you have read all the Funding Criteria and Additional Guidance Notes before completing this form PLEASE

COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED

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1 - Your Organisation or Group	I =					
Name of Organisation	Trowbridge Town Council					
Contact Name						
Contact Address						
Contact number			e-mail			
Organisation Type	Non profit organia	otion 🗆	Dorioh/	Town Council 🔀	Other	
<u> </u>	Non profit organis	ation	Pali511/	Town Council 🖂	Other	
2 – Your Project		1				
In which Community Area does you						
place? (Please give name – see pp	2-4 of funding					
pack)		TDOME	DIDOE			
In which Parish does your project to	ake place?	TROWE				
What is your project?		Enhancement of and environmental improvements to Christmas Lights				
		Christm	as Lights			
Where will your project take place?		Trowbridge Town Centre				
When will your project take place?				January 2010		
Does your project demonstrate a di	ract link to the	YES 🖂		6 and 11 of original pla	n	
Community Plan for the area?	iect iiik to tile	NO \square	rayes	o and in or original pla	11.	
If YES, please provide a reference/p	age no	100 🗀				
Please confirm your project will be		YES⊠				
March 2010	completed by 31					
march 2010						
What community benefits will your age, gender, particular groups) IMPORTANT: PLEASE DO NOT TYPE IN PASPACES) In order to encourage business and br and struggling businesses the propose will all be environmentally superior, us sets, thus reducing the CO2 impact. T	ARAGRAPHS – THIS SEC ing vibrancy into the al is to enhance the C ing LED technology.	TION IS LIM town centi hristmas I The new I	IITED TO 15 re when th ights displ ights will a	00 CHARACTERS ONLY (IN here are a number of en lay with additional light hilso replace some old to	NCLUSIVE OF npty shops sets. These	

Wiltshire Council will be unable to meet the ongoing costs of your project. Please describe, therefore, how you will ensure the financial sustainability of your project beyond the period of this grant (if successful)?						
The ongoing maintenance of these lights will be the responsibility of Trowbridge Town Council.						
3 – Additional information to support and strengthen your application e.g consultation, comm	unity					
involvement, energy efficiency measures	will bonofit					
Please tell us more about the organisations and groups that are involved in your project, who will benefit from the award and how will you know that it is making a difference. IMPORTANT: PLEASE DO NOT TYPE IN PARAGRAPHS – THIS SECTION IS LIMITED TO 1500 CHARACTERS ONLY (INCLUSIVE OF						
SPACES) The Town Council currently provides a number of light sets throughout the town centre during Decem	ber and early					
January for the festive season. At this recessionary time it is importnat to continue investment in this facility. This						
proposal has the support of the Chamber of Commerce.	•					
4. Polotionship between your project and Wiltehire Council priorities. Which of the following	. statements					
4 – Relationship between your project and Wiltshire Council priorities. Which of the following apply to the project/service your hope to provide? <i>Please tick as many as you think apply.</i>	statements					
The project will:						
Engage with local people to find out their priorities and work with them to deliver solutions						
Increase number of local people involved in regular volunteering						
Increase the number of affordable homes						
Improve access to services for people with dementia						
Improve access to primary care services for people with learning disabilities						
Encourage people to make lifestyle changes that will have a positive impact on the health of both						
themselves and their family						
Improve adult participation in sport						
Improve young people's participation in positive activities						
Improve business productivity through innovation e.g. provide business with specific information, knowledge events and other support						
Increase the number of people who feel safe in their community						
Improve local area through intergenerational activities such as street clean ups and community events						
Reduce perceptions of antisocial behaviour						
Reduce deaths through accidents						
Increase uptake of energy efficiency and renewable energy measures						
Increase levels of recycling and re-using household waste especially amongst those people who currently do not recycle						
Increase awareness of climate change adaptation, leading to action taken by individuals, communities and businesses						
Reduce carbon emissions from transport through development, sustainable transport, traffic management and new technology						
Improve local biodiversity						

THE FOLLOWING INFORMATION NAPPLICATION BEING REJECTED 5 – Information relating to your last		•	SO WILL RES	SULT II	NTHE
- morniación rolating to your las	. amaar aoooan				
Year Ending: 31/03/2009	Month: March		Year: 2009		
Total Income:	£1,738,917	£1,738,917			
Minus Total Expenditure:	£1,743,865	£1,743,865			
Surplus/Deficit for year:	£(4948)	£(4948)			
Reserves held:	£254,122	£254,122			
6 - Financial Information					
PROJECT COSTS A Please provide a <u>full</u> breakdown e. installation etc.	g equipment,	PROJECT INCOME Please list all sour provisional (P) or o	ces of funding	for thi	s project, as
				P/C	
New low energy LED light sets	£5,000	Trowbridge Town C	ouncil	С	£5,000
Installation of new lights	£1,000				£
Replace old sets with LED sets	£4,000				£
	£				£
	£				£
	£				£
	£				£
	£				£
	£				£
	£				£
TOTAL PROJECT EXPENDITURE	£10,000	TOTAL PROJECT	INCOME		£ 5,000
Total Project Income B		£5,000			
Total Project Expenditure A		£10,000			
Project Shortfall A - B		£ 5,000			
Award sought from Wiltshire Coun		£5,000			
Is your organisation able to claim \	/AT?	Yes 🛛 No			
7 - Management					
How many people are involved in t	he management	of your group/organ	isation?		
People Over 50 years	Male 18	Female 2			
People Under 25 years	Male	Female			
Disabled People	Male 4 F	emale 0			
Black & Minority Ethnic people	Male	Female			
8 - Supporting Information - Pleas	se enclose the fo	llowing documentati	ion		
Enclosed (please tick)					
	nts or Annual Rep	port			
	or current financia	ıl year			
Project budget (if applicable)					
□ Terms of Reference/Constitution	n/Group Rules				
For new groups, only the group's to covering a period of 12 months is r		e and a projected inc	come and expe	enditure	e budget

9 – Equal Opportunities – To assist us with our equalities monitoring please indicate whether your application is specifically targeted at people within one or more of the six equality strands. You may tick yes for more than one category e.g. if your project is for ethnic minority senior citizens.						
Please note that by answering NO to any of the following questions WILL NOT PREJUDICE your application.						
a) Is your project targeted towards, or of particular relevance to, people of a specific age?						
☐ Yes ☒ No If 'Yes' please tick ☐ Under 25's ☐ Over 50's						
b) Is your project targeted towards, or of particular relevance to, people with disabilities (physical or mental/emotional)?						
☐ Yes ⊠ No						
c) Is your project targeted towards, or of particular relevance to, people of a specific gender?						
☐ Yes ☒ No If 'Yes' please tick ☐ Male ☐ Female						
d) Is your project targeted towards, or of particular relevance to, people of a specific sexuality?						
☐ Yes ☒ No						
e) Is your project targeted towards, or of particular relevance to, people from a specific ethnic background?						
☐ Yes ☒ No If 'Yes', indicate the ethnic background of the people who will benefit from your project.						
White ☐ British ☐ Irish ☐ Other Mixed ☐ Mixed ethnic background						
Asian or Asian British						
Black or Black British						
Chinese or other ethnic group						
f) Is your project targeted towards, or of particular relevance to, people from a specific religion or faith? (e.g. a Muslim women's sports club, which encourages active participation, rather than promoting religious beliefs)						
☐ Yes ☐ No If 'Yes' please specify						
10 - Declaration (on behalf of organisation or group) - I confirm that						
 Accounts and quotes where appropriate are enclosed. A copy of our constitution or terms of reference are enclosed. The information on this form is correct, that any award received will be spent on the activities specified, that I will complete a monitoring form (if requested) following completion of the project. If an award is received, I will complete and return an evaluation sheet That any other form of licence or approval for this project has been received prior to submission of this application That the necessary policies and procedures will be in place prior to the commencement of the project outlined in this application. ☐ Child Protection ☑ Public Liability Insurance ☐ Equal Opportunities ☐ Access Audit ☐ Environmental Impact ☐ Planning permission applied for (date) or granted (date) ☑ That acknowledgement will be given of Wiltshire Council support in any publicity or printed material. ☑ I give permission for press and media coverage by Wiltshire Council in relation to this project. 						
Name: Position in organisation: Date: 11/08/2009						
Please return your completed application to the appropriate Area Board Locality Team (see pages 9-10)						