

Reference no

Item no.13 Appendix 8

> Log no TID013/10

For office use

Community Area Grant Application Form 2010/2011

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

We strongly advise that you contact your Community Area Manager before completing your application.

1 - Your organisat					
Name of	The Parochial C	hurch Council of C	Collingbo	ourne Kingston	
organisation Contact name					
Contact name					
Contact address					
Contact number			e-mail		
Organisation type	Not for profit or	rganisation 🗌	Parish/	/town council	
	Other, please specify Parochial Church Council				
2 – Your project					
In which community area does your project take place? (Please give name – see section 3 of the grants pack)		Tidworth			
Does your town/parish council know about your project?		Yes ⊠ No □			
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).		Five of the six bells at St Mary's Church, Collingbourne Kingston require new clapper bushes. The existing ones are worn out and may cause damage to the bells if not renewed.			
Where will your proje	ct take place?	St Mary's Church	n, Colling	gbourne Kingston.	
When will your project take place?		Early 2011			
How many people will benefit from your project?		Approximately 450			
How does your project demonstrate a direct link to the community plan for your area?		Under the Tidworth Community Area Plan, Housing and Built Environment, ninth point, meeting places throughout the Community are to be supported.			
Please provide a reference/page no.					

What is the link between your projet parish plans. Linder the Tidworth Community Area			•	Ü	, ,	
Under the Tidworth Community Area Plan the existence of meeting places is supported, and one of the objectives is 'healthy and vibrant villages in the rural population'.						
How did you discover there was a r	need for	r your pi	roject and how	will your	r project benefit your local	
community? Important: Please do not type in pa			-	•		
	bellsin t s such	he Chur as Rem	ch tower. The k embrance Day i	oells are in additio	an important community asset, on to weddings, funerals and other	
Church Services. The bells are owr Everleigh Society of Ringers.	ned by t	he Chur	ch but rung by	member	rs of the Collingbournes and	
Any other information about your p	roject.					
3 - Management						
How many people are involved in the Of these, how many are:	ne mana	agement	t of your group/	organisa	ation? 9	
Over 50 years	Male	3	Female	5]	
25 – 50 years	Male	0	Female 1]	
Under 25 years	Male	0	Female	00]	
Disabled People	Male		Female]	
Black and Minority Ethnic people	Male	0	0 Female]	
Black and Millotty Ethine people	Wate	0	0			
If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it?						
Once the clapper bushes have been r further expenditure.	eplaced	they are	e expected to las	t for mar	ny years and should not require any	

If you were not awarded the full amoun	t requested, what v	oul	d be the impact on your project?
I t would not proceed unless funding could	be obtained from el	sewl	nere, and damage to the bells might ensue
How will you know whether your project	t has made a differ	ence	e in the community?
If the bells remain fit for use			
Have you contacted Charities			
Information Bureau for help with your application/ to seek funding?	Yes	No	
To who have you applied for funding for this project (other than Wiltshire	No other source		
Council)?			
Have you been evereeful?		NI -	
Have you been successful?	Yes	No	
Have you or do you intend to apply for a grant from another area board	Yes	No	
within this financial year?			
If yes, please state which ones.			
Are you in receipt or anticipating	Yes	No	\square
other funding from Wiltshire Council for this project?			<u>~7</u>
4 - Information relating to your la	st annual accou	ınts	(if applicable)
			(iii depriodicio)
Year ending:	Month: December		Year: 2009
A - Total income:	£22,767		
B - Minus total expenditure:	£20,784		
Surplus/deficit for year: (A minus B)	£1983		
Free reserves held:	£12,024		

5 - Financial information						
Project Costs A Please provide a <u>full</u> breakdown e.g. equipment, installation etc.		Project Income B Please list all sources of funding for this project, as provisional (P) or confirmed (C)				
		P/C				
	£892	Own fundraising/reserves		£		
	£	2		£		
	£	Parish/town council		£		
	£	Trusts/foundations		£		
	£	Trusts/Touridations		£		
	£	In kind		£		
	£			£		
	£	Other		£		
	£			£		
	£			£		
	£			£		
	£			£		
Total Project Expenditure	£892	Total Project Income		£ 0		
Total project income B		£0				
Total project expenditure A		£892				
Project shortfall A – B		£892				
Award sought from Wiltshire Council Ar	ea Board	£892				
Bank Details						
Please give the name of the organisations' bank account e.g. Barclays		Lloyds TSB				
Please give the title name of the organis bank account e.g. current	ations'	Current				
6 - Supporting information - Please enclose the following documentation						
Enclosed (please tick)						
	Written quotes including the one you are going to use ■					
□ Latest inspected/audited accounts or	annual repo	ort				
☐ Income and expenditure budget for c	current financ	cial year				
Project budget (if applicable)						
Terms of reference/constitution/group rules						
Evidence of ownership/lease of buildings and/or land						
For new groups, only the group's terms of reference and a projected income and expenditure budget covering a period of 12 months is required.						

7 - Equalities and Inclusion – Wiltshire Council is committed to ens through the Area Boards benefits all sections of our community an and inclusion. To assist us in assessing how your application aims commitment to equality and inclusion, please provide a brief answer.	d promotes equality s to meet our er to the following:
 a) How does your project work to either (a) promote equality and access to (b) reduce disadvantage? 	services/facilities, and/or
N/A	
b) How does your project work to promote inclusion, participation and good	I community relations?
c) Is your project targeted at a specific group? If yes, please tick any of the	following which apply
☐ Under 25's ☐ Over 50's	
☐ Mostly or all men/boys ☐ Mostly or all women/girls	
☐ Specific minority ethnic groups (please state which groups) No	
☐ Specific faith groups (please state which groups)	
People/families on low income	
☐ Other disadvantaged groups (please state which groups)	
8 - Declaration (on behalf of organisation or group) - I confirm that	
I have read the funding criteria	
☐ The information on this form is correct, that any award received will be spent specified, that I will complete a monitoring form (if requested) following complete.	
☐ If an award is received, I will complete and return an evaluation sheet.	
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 ☐ That any other form of licence or approval for this project has been received project this application. 	orior to submission of
☐ That any other form of licence or approval for this project has been received	encement of the
 ☑ That any other form of licence or approval for this project has been received per this application. ☑ That the necessary policies and procedures will be in place prior to the communication. 	encement of the Insurance
 ☑ That any other form of licence or approval for this project has been received paths application. ☐ That the necessary policies and procedures will be in place prior to the communication of the project outlined in this application. ☐ Child Protection ☑ Public Liability ☐ Equal opportunities ☐ Access audit ☐ Environ 	encement of the Insurance
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