

## Wiltshire Council

Where everybody matters

Reference no

Log no

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 Trowbridge Tow		n Council				
organisation						
Contact name						
Contact address						
Contact number		e-mail				
Organisation type Not for profit or		ganisation 🗌 🛛 Parish/town council 🛛				
	Other, please s	pecify				
2 – Your project						
In which community area does your project take place? (Please give name – see section 3 of the grants pack)		Trowbridge				
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).		Trowbridge Christmas Lights Extravaganza. This event will promote the whole of Trowbridge Town Centre working in partnership with The Shires Shopping Centre. The day will include live entertainment, charrity promotions, a Mr & Mrs Christmas procession and a Christmas market within the Shires Centre.				
Where will your project take place?		Fore Street and Shires Shopping Centre, Trowbridge				
When will your project take place?		04/12/10				
How many people will benefit from your project?		9,000				
How does your project demonstrate a direct link to the community plan for your area?		Economy, including tourism and employment and Culture, including Leisure, Recreation, Heritage and the Arts				
Please provide a reference/page no.		6 & 8/9				

What is the link between your projet parish plans.	ect and other lo	cal priorities?	e.g. Priorities set by your area board and			
Working in partnership to improve community facilities and bringing a vibrant atmosphere to the town centre.						
How did you discover there was a r	need for your p	roject and how	will your project benefit your local			
	ragraphs – This	s section is lim	ited to 1200 characters only (inclusive of			
spaces) The Christmas Lights switch on , o						
Trowbridge and the surrounding areas, this year, working in pertnership with the Shires Shopping Centre Management team we will extend the event not only for the high street but also the two shopping centres in						
Trowbridge. Previously a Christmas market has been located on Fore Street, which, although attractive has not always been well received by the Fore Street retailers. This year we will locate the Christmas market						
within the Shires Centre thus attracting better quality traders within the shopping centre environment. The Santas grottos this year will be located in the shopping centre with a level of co-promotion throughout						
Trowbridge and the outlying areas.						
Any other information about your p The Town Council has worked hard to		ernative solution	for our Christmas Lights switch on event.			
	es us the opport	unity to resolve	a number of issues, whilst getting more for the			
3 - Management						
How many people are involved in the of these, how many are:	ne managemen	t of your group	/organisation? 40			
Over 50 years	Male 17	Female	1			
		Female 3				
25 – 50 years						
Under 25 years	Male	Female				
Disabled People	Male 3	Female				
Black and Minority Ethnic people	Male	Female				
If your project is intended to contin fund it?	ue after the Wi	Itshire Council	funding runs out, how will you continue to			
On this occasion we are working close			entre, in future years we will increase business			
participation in the Trowbridge Christr	nas Lignis event					

If you were not awarded the full amount requested, what would be the impact on your project?						
The project would have to be substantially reduced						
How will you know whether your project						
public.	JIIOUL IIIE UAY as we	lasi	feedback from the retailers and the general			
	1					
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 Council)?						
Have you been successful?		N-5				
	Yes	No	<u> </u>			
Have you or do you intend to apply for a grant from another area board within this financial year?	Yes 🔄	No				
If yes, please state which ones.						
Are you in receipt or anticipating other funding from Wiltshire Council for this project?	Yes 🗌	No	$\boxtimes$			
4 - Information relating to your last annual accounts (if applicable)						
Year ending: 31/03/2009	Month: March		<b>Year</b> : 2009			
A - Total income:	£1,738,917.00					
B - Minus total expenditure:	£1,743,865.00					
Surplus/deficit for year: (A minus B)	<b>£</b> (4948)					
Free reserves held:	£254,122.00					

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			
Hire of snow blowers	<b>£</b> 870	Own fundraising/reserves	С	<b>£</b> 3,000		
Security	<b>£</b> 1,539			£		
Shed installation	<b>£</b> 1,050	Parish/town council		£		
Christmas presents	<b>£</b> 835			£		
PA System	<b>£</b> 585	Trusts/foundations		£		
Staffing	<b>£</b> 4,090			£		
Advertising/Marketings	<b>£</b> 763	In kind		£		
Procession Outfitsx 17	<b>£</b> 408			£		
Innovative Events	<b>£</b> 2,840	Other		£		
	£	Shires Shopping Centre	С	<b>£</b> 5,000		
	£			£		
	£			£		
	£			£		
Total Project Expenditure	£12,980	Total Project Income		<b>£</b> 8,000		
Total project income B		£8,000				
Total project expenditure A	£12,980					
Project shortfall A – B	<b>£</b> 4,980					
Award sought from Wiltshire Cour	<b>£</b> 4,980					
Bank Details						
Please give the name of the organ account e.g. Barclays	isations' bank					
Please give the title name of the o bank account e.g. current	rganisations'					

## Enclosed (please tick)

- Written quotes including the one you are going to use
- Latest inspected/audited accounts or annual report
- Income and expenditure budget for current financial 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 ensuring that its work through the Area Boards benefits all sections of our community and promotes equality and inclusion. To assist us in assessing how your application aims to meet our commitment to equality and inclusion, please provide a brief answer to the following:				
<ul> <li>a) How does your project work to either (a) promote equality and access to services/facilities, and/or</li> <li>(b) reduce disadvantage?</li> </ul>				
This event is free and accessable to all members of the public with promotion being done throughout the community of Trowbridge and the surrounding areas.				
How does your project work to promote inclusion, participation and good community relations?				
This event promotes inclusion by allowing Community groups, twinning associations and charities to promote their organisations throughout the day.				
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)				
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 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, printed or website material.				
☑ I give permission for press and media coverage by Wiltshire Council in relation to this project.				
Name: t Date: 06/08/2010				
Position in organisation:				
Please return your completed application to the appropriate Area Board Locality Team				