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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 organisation or group				
Name of organisation	GLOUCESTER ROAD ALLOTMENT ASSOCIATION			
Contact name				
Contact address				
Contact number		e-mail		
Organisation type	Not for profit organisation ⊠ Parish/town council □			
	Other, please specify			
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).		Provision of facilities for Special Needs individuals or groups of an adapted allotment area; raised beds, hard surface pathways, suitable access from the hard surface area of car park. Also provision of Natsol Composting Toilet with funding from a pending Awards for All grant application.		
Where will your proje	ect take place?	Gloucester Road Allotments Trowbridge BA14 OAQ		
When will your project	ct take place?	April 2011		
How many people wil your project?		450		
How does your project a direct link to the cofor your area?		Culture, including leisure, recreation, heritage & arts		
Please provide a reference/page no.		8		

	ect and other local priorities? e.g. Priorities set by your area board and	
parish plans. This project will empower disable	ed individuals the ability to access and use the allotment site thus	
promoting equal opportunities. We	have received a number of requests for this facility.	
How did you discover there was a r community?	need for your project and how will your project benefit your local	
Important: Please do not type in pa	aragraphs – This section is limited to 1200 characters only (inclusive of	
	lotment and Leisure Gardeners magazine [we are all members of this	
	sites in the country do provide Community sites such as this and we y situated close to the car park and suited to the erection of the	
composting toilet (Application with	h Awards for All pending) and the installation of the raised beds and	
It is always reported in national pre	ime to develop this area for the Disabled and Special Needs Communitess and allotment magazines that these sites are of great importance to	
encourage people to allotment gard	dening.	
Any other information about your p Since forming our Association 10 year	<b>project.</b> ars ago and going self mananging 2 years ago we have tried to do communit	V
projects on a small scale, holding BB0	Q's and Open Days, and Annual Show and BBQ. Entering into all communting	
enjoy our wonderful allotment site. V	m, South West in Bloom, Open Gardens. So that all people of the area can We have built our own Club Hut with full kitchen facilities mostly without gran	nt
funding. We now feel we are ready to	o tackle this large and complex Community project.	
3 - Management		
How many people are involved in the Of these, how many are:	the management of your group/organisation? 1	
Over 50 years	Male 5 Female 5	
25 – 50 years	Male 2 Female 2	
Under 25 years	Male 0 Female 0	
Disabled People	Male Female 00 0	
Black and Minority Ethnic people	Male Female	
	00 0	
	nue after the Wiltshire Council funding runs out, how will you continue	to
fund it? The projects maintenance costs wi	Ill be covered by our own fundraising efforts.	
ine projects maritenance costs wi	ir be covered by our own runarations critical	

If you were not awarded the full amoun	t requested, what woul	d be the impact on your project?		
The project is linked to gaining funding through other grants, this application is therefore essential to the completion of our overall project.				
How will you know whether your project	ct has made a differenc	e in the community?		
		visabled and Special Needs members of our ee. This will be the only facility of its		
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)?	Awards for All fundin (Pending) Trowbridge Town Cound	ng for the Natsol Composting Toilet £10,000		
Have you been successful?	Yes No			
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			
4 - Information relating to your last annual accounts (if applicable)				
Year ending: 2010	Month: August	Year: 2010		
A - Total income:	£4091.53			
B - Minus total expenditure:	£2852.29			
Surplus/deficit for year: (A minus B)	£1. 239. 24			
Free reserves held:	<b>£2</b> , 610. 89			

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	
	£	Own fundraising/reserves		<b>£</b> 521
RAISED BEDS, PAVING ETC	<b>£</b> 5,373			£
CAR PARKING AND ACCESS	<b>£</b> 1,848	Parish/town council		£1,700
NATSOL COMPOSTING TOILET	<b>£</b> 7,620			£
INSTALLATION OF ABOVE	<b>£</b> 2, 064	Trusts/foundations		£
	£	AWARDS FOR ALL		<b>£</b> 9, 684
	£	In kind		£
	£	Other		£
	£	Other		£
	£			£
	£			£
	£			£
Total Project Expenditure	£16,905	Total Project Income		£11,905
Total i Toject Experiordie	1 2 10,903	Total i Toject income		211,905
Total project income B		£11,905		
Total project expenditure A		£16,905		
Project shortfall A – B		£5,000		
Award sought from Wiltshire Council Area Board		<b>£</b> 5,000		
Bank Details				
Please give the name of the organisa account e.g. Barclays	tions' bank			
Please give the title name of the orga bank account e.g. current	nisations'			
6 - Supporting information - F	Please enclo	se the following document	ation	
Enclosed (please tick)				
Written quotes including the one y	ou 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/gr	roup rules			
Evidence of ownership/lease of bu	ildings and/or l	and		
For new groups, only the group's term covering a period of 12 months is recovering a period of 12 months is recovering a period of 12 months.		e and a projected income and ex	cpenditure	e budget

7 - Equalities and Inclusion – Wiltshire Council is committed to ensuring that its wathrough the Area Boards benefits all sections of our community and promotes equand 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 follow	uality
<ul> <li>a) How does your project work to either (a) promote equality and access to services/facilities</li> <li>(b) reduce disadvantage?</li> </ul>	, and/or
The entire project is based on the provision for allotment gardening to groups of peop as currently excluded. The compsosting toilet is a staturtory requirement for these us	
b) How does your project work to promote inclusion, participation and good community relat	ions?
It will allow Disabled and Special Needs users to participate in community iniatives s Trowbridge in Bloom, South West in Bloom, Open Gardens, local gardening clubs and all association events we already hold.	
c) Is your project targeted at a specific group? If yes, please tick any of the following which a	pply
☐ 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) Additional Needs Groups or individua	11
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	ect.
$oxed{oxed}$ If an award is received, I will complete and return an evaluation sheet.	
$oxed{oxed}$ That any other form of licence or approval for this project has been received prior to submission this application.	n of
☑ 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)yesor granted (date)	
$oxed{oxed}$ That acknowledgement will be given of Wiltshire Council support in any publicity, printed or we material.	bsite
☑ I give permission for press and media coverage by Wiltshire Council in relation to this project.	
Name: Date: 28/01/2011	
Position in organisation:	
Please return your completed application to the appropriate Area Board Locality Team	