Reference no

# Wiltshire Council

► Where everybody matters

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## Community Area Grant Application Form 2011/2012

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

For larger projects we strongly advise you to contact Charities Information Bureau three months before you approach the area board. (See Section 2 for contact details) Please contact your Community Area Manager before completing your application

#### (See Section 3 for contact details)

1. Your organisation or group						
Name of organisation	Semington Village Hall Management Committee					
Contact name						
Contact address						
Contact number			e-mail			
Organisation type	Not for profit or	ganisation 🛛	Parish	town council 🗌		
	Other, please specify Charity					
2. Your project						
Project Title/Name	New suspended ceiling in main hall					
What is your project about and what does it aim to achieve? Important: This section is limited to 600 characters only (inclusive of spaces).	Available for all t wakes	ypes of uses. Ba	bies, tod	dlers, dancers, bridge club, s	skittles, functions and	
In which community area does your project take place? ( <i>Please give</i> name – see section 3 of the grants pack)		Semington village but hall is used by surrounding areas as situated between Trowbridge and Melksham				
I/we have discussed our project with the town/parish council?		Yes 🖂	Date	Sept 11	No 🗌	
I/we have discussed of with our Wiltshire cou		Yes 🛛	Date	Sept 11	No 🗌	

Where will your project take place?	Village Hall				
When will your project take place?	Early new year if possible				
How did you discover there was a need for your project ( <i>please</i> <i>provide evidence</i> ) and how will your project benefit your local community?	Builders doing other worksd to outside walls to prevent roof spread getting worse. A neater tidier ceiling to replace 30 year old one. Better lighting.				
Important: Please do not type/write in paragraphs – This section is limited to 1000 characters only (inclusive of spaces)					
How many people will benefit from your project?	Population of 800				
How does your project demonstrate a direct link to the local community plan for your area? www.wiltshire.gov.uk/areaboards Please provide a reference/page no.	Village halll is central to all village plans. V	Vell used by vill	agers		
To be completed ONLY where t	own/parish councils are making a	n applicatio	n		
Is your project one which parish/town taxes to fund?	councils have powers to raise local	Yes 🗌	No 🖂		
Could your project be funded from yo	Yes 🗌	No 🛛			
Is your project urgent (having to be co answer YES please provide evidence	Yes 🗌	No 🖂			
Any other information about your pro- Imperial suspended ceiling of 30 years to	ject. b be replaced by metric ceiling and new ene	ergy saving light	ing		

3. Management					
How many people are involved in the Of these, how many are:	managemer	nt of your group	/organisatio	on?	
Over 50 years	Male 6	Female	2		
25 – 50 years N	lale	Female			
Under 25 years	Male	Female			
Disabled People	Vale	Female	1		
Black and Minority Ethnic people	Male	Female			
If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it? N/A					
How will you know whether your proje collected to enable you to know that t local need? Increased usage					
Have you contacted Charities Information Bureau for help with your application/ to seek other funding?	Yes 🗌	Date		,	No 🖂
To whom have you applied for funding for this project (other than Wiltshire Council)?	Name of	Funder		Amount Applied For	Amount Received
<i>Please <u>list</u> with amount applied for and whether you have been successful</i>					
Have you or do you intend to apply for a grant from another area board within this financial year? <i>If yes, please state which one(s).</i>	Yes 🗌	No 🖂		1	1
Are you in receipt or anticipating other funding from other Wiltshire Council departments for this project?	Yes 🗌	No 🖂			

Year ending:	Month: De	Month: Dec Year: 2010						
A - Total income:	£15240							
B - Minus total expenditure:	<b>£</b> 14630							
Surplus/deficit for year: (A minus B)	Surplus/deficit for year: (A minus B) £610							
Free reserves currently held:	<b>£</b> 6762							
5. Financial information – If you	can claim b	ack V.A.T.	please exclude from	n figure	s given belo			
Project Costs A Please provide a <u>full</u> breakdown e.g. e installation etc.	quipment,	Please lis	ncome B st all sources of fundi nal (P) or confirmed (0		is project, as			
				P/C				
Remove old ceiling, fit new and	£	Own fund	draising/reserves		£			
insulate above with polybags	<b>£</b> 3,959			С	<b>£</b> 3,000			
Lighting replaced	<b>£</b> 1,084	Parish/town council			£			
2 large skips for old ceiling	£				£			
tiles and wires	<b>£</b> 400	Trusts/foundations			£			
	£				£			
	£	In kind			£			
	£				£			
	£	Other			£			
	£				£			
	£				£			
	£				£			
Total Project Expenditure	<b>£</b> 5,443	Total Pro	ject Income		<b>£</b> 3,000			
Total project income B	•	<b>£</b> 3,000		•	•			
Total project expenditure A		£5,443						
Project shortfall A – B		£2,443						
Grant sought from Wiltshire Council Area Board		<b>£</b> 2,443						
Bank Details								
Please give the name of the organisati account e.g. Barclays	ons' bank							
Please give the title name of the organ bank account e.g. current	isations'							

### 6. Supporting information – Please enclose <u>all</u> the following documentation as failure to do so may lead to a delay in your application being considered

#### Enclosed (please tick)

- Written quotes including the one(s) you are going to use
- Latest inspected/audited accounts or annual report or Income/expenditure budget for current financial year
- 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. 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.
$oxedsymbol{\boxtimes}$ 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  ☐ Safeguarding Adults
Public Liability Insurance
Access audit Environmental impact
Planning permission applied for (date) or granted (date)
$oxed{int}$ 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: Date: 02/12/2011
Position in organisation:
Please return your completed application to the appropriate Area Board Locality Team (see section 3)