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| Reference no |
| Log no |
| For office use |

Area Board Projects and Councillor Led Initiatives Application Form 2018/2019

To be completed by the Wiltshire Councillor leading on the project
Please ensure that you have read the Funding Criteria before completing this form
PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED

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| 1. Contact Details | |
| Area Board Name | Trowbridge |
| Your Name | Cllr DH |
| Contact number | e-mail david.halik@wiltshire.gov.uk |
| 2. The project | |
| Project Title/Name | Neighbourhood Watch Signs |
| Please tell us about the project /activity you want to organise/deliver and why? <i>Important: This section is limited to 900 characters only (inclusive of spaces).</i> | Residents around Pitman Avenue have setup a neighbourhood watch group and have requested that signs be placed in and around the area to indicate that the area is now such. One of the group contacted me as local councillor to assist and help where possible. Police and Highways have been informed of the group and been supportive as has Wiltshire Council. The group have no funding for any signage hence this request to enable signs to be purchased and placed within the area. |
| Where is this project taking place? | Pitman Avenue off Frome Road Trowbridge |
| When will the project take place? | ASAP |
| What evidence is there that this project/activity needs to take place/be funded by the area board? | Neighbourhood Group request |

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| How will the local community benefit? | The process of setting up a neighbourhood group has already helped. Neighbours have met who have not before spoken to each other and they are feeling better for it. It has made them feel they have a voice and can make the area safer for themselves and others. There have been a few attacks nearby so as a councillor I fully support the request in helping protect the area by requesting funds to obtain the signs they need. | | |
| Does this project link to a current Community Issue? (if so, please give reference number as well as a brief description) | | | |
| Does this project link to the Community Plan or local priorities? (if so, please provide details) | Safer Streets - Community Resident Group Development – Police Working within the Community | | |
| Is this project supported by the Local Youth Network or Community Area Transport Group? (if it relates to young people or highways and transport) | | | |
| What is the desired outcome/s of this project? Neighbourhood Safety and Residents Community Development | | | |
| Who will be responsible for managing this project? | | | |
| 3. Funding | | | |
| What will be the total cost of the project? | 5 signs required for area at £9.90 plus £4.90 fixings per sign + delivery charge £5.00 total £79.00 approx costing with free installation by p /stew | | |
| How much funding are you applying for? Please note that only capital funding is available | £79.00 | | |
| If you are expecting to receive any other funding for your project, please give details | Source of Funding | Amount Applied For | Amount Received |
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| Please give the name of the organisation and bank account name (but not the number) your grant will be paid in to. (N.B. We cannot pay money into an individual's bank account) | | | |
| 4. Declaration – I confirm that... | | | |
| <input type="checkbox"/> The information on this form is correct and that any grant received will be spent on the activities specified <input type="checkbox"/> Any form of licence, insurance or other approval for this project will be in place before the start of the project outlined in this application | | | |
| Name: Cllr David Halik | | Date: 03/05/2018 | |
| Position in organisation: | | | |
| Please return your completed application to the appropriate Area Board Locality Team (see section 3) | | | |

