

Community Area Grant Application Form

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

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1 - Your Organisation or Group	1 11-00			0	: 80.674
Name of Organisation	MERE SI	JOOKER	- Chi	16	
Contact Name					
Contact Address					
Contact number			e-mail		
Organisation Type	Non profit organis	ation 🗌	Parish/	Town Council 🗌	Other 🕒
2 – Your Project		77 17 17 18			
In which Community Area does you		SOUTH	WILTS	HIRG - MERE AN	D DISTRICT
place? (Please give name – see pp pack)	2-4 of funding			4	
In which Parish does your project take place?		MERE.			
What is your project?		TO INSTALL EMERGENCY			
		Wighting within CLUB PREMISES			
Where will your project take place?		MERE SNOOKER CLUB - SANISBURY STREET			
When will your project take place?		WHEN FUNDS AVAILABLE			
Does your project demonstrate a direct link to the		YES 🖳			
Community Plan for the area?		NO MA			
If YES, please provide a reference/		1			
Please confirm your project will have commenced by		YES			
31 st March 2010		NO 🗗			
What community benefits will your	project provide and	, who are	the bene	ficiaries (e.g. numbe	rs of people,
age, gender, particular groups) IMPORTANT: PLEASE DO NOT TYPE IN PARAGRAPHS – THIS SECTION IS LIMITED TO 1500 CHARACTERS ONLY (INCLUSIVE OF SPACES)					
THE AWARD WILL H	ELP US MAINT	min T	HE RE	EQUIRED STAN	DARD
OF FIRE SAFETY in	me chub	WHIC	H PRO	ovides faciliti	ies for
THE OF STATE OF STATE		0.11.00	75	WE WELCOME	MEMBERS

THE AWARD WILL HELP US MAINTAIN THE REQUIRED STANDARD OF FIRE SAFETY IN THE CLUB WHICH PROVIDES FACILITIES FOR THE PLAYING OF SNOOKER AND BILLIARDS. WE WELCOME MEMBERS OF BOTH SEXES FROM THE AGE OF 16. (PARENTS WHO GIVE MEMBERS MAY BRING CHILDREN YOUNGER THOW 16 SO LONG AS THEY SUPERVISE THEM, THIS IS A DEVELOPING AREA OF CLUB USE)

NO ALCOHOL IS Allowed, THUS MAKING IT A SUITABLE VENUE FOR YOUNGSTERS.

Wiltshire Council will be unable to meet the ongoing costs of your project. Please describe, therefore, how					
you will ensure the financial sustainability of your project beyond the period of this grant (if successful)?					
ANY REQUIRED MAINTENENCE OF EMERGENCY LIGHTING WI	h				
BE FUNDED BY THE CLUB.					
3 – Additional information to support and strengthen your application e.g consultation, comm	unity				
involvement, energy efficiency measures Please tell us more about the organisations and groups that are involved in your project, who	will benefit				
from the award and how will you know that it is making a difference.					
IMPORTANT: PLEASE DO NOT TYPE IN PARAGRAPHS – THIS SECTION IS LIMITED TO 1500 CHARACTERS ONLY (INCLUSIVE OF SPACES)					
THE CLUB HAS BEEN IN EXISTANCE FOR ABOUT 100 YEARS,	CATERING				
FOR ADULT PARTICIPATION AND WE HOPE TO BEGIN EXTENDING THIS					
TO YOUNGSTERS. THE INSTALLATION OF THE EMERGENCY LIGHTING					
WILL HELP US MEET REQUIRED STANDARDS					
*					
4 - Relationship between your project and Wiltshire Council priorities. Which of the following	g statements				
apply to the project/service your hope to provide? Please tick as many as you think apply. The project will:					
Engage with local people to find out their priorities and work with them to deliver solutions					
Increase number of local people involved in regular volunteering					
Increase the number of affordable homes					
Improve access to services for people with dementia					
Improve access to primary care services for people with learning disabilities Encourage people to make lifestyle changes that will have a positive impact on the health of both					
themselves and their family					
Improve adult participation in sport	9				
Improve young people's participation in positive activities					
Improve business productivity through innovation e.g. provide business with specific information,					
knowledge events and other support					
Increase the number of people who feel safe in their community	Ш				
Improve local area through intergenerational activities such as street clean ups and community events					
Reduce perceptions of antisocial behaviour					
Reduce deaths through accidents					
Increase uptake of energy efficiency and renewable energy measures					
Increase levels of recycling and re-using household waste especially amongst those people who					
currently do not recycle	<u> </u>				
Increase awareness of climate change adaptation, leading to action taken by individuals, communities and businesses	□ .				
Reduce carbon emissions from transport through development, sustainable transport, traffic					
management and new technology					
Improve local biodiversity					

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THE FOLLOWING INFORMATION MUSAPPLICATION BEING REJECTED			SOLI IN THE			
5 – Information relating to your last a	nnual account	s (if applicable)				
Year Ending:		Month: December	Year: 2010			
Total Income:		£ 1441.08				
Minus Total Expenditure:		£ 1001.38				
Surplus/Deficit for year:		£ 439.70 (inch	£ 439.70 (includes f 450.90)			
Reserves held:		£ 0,00				
6 - Financial Information						
Please provide a full breakdown e.g equipment,		PROJECT INCOME B Please list all sources of funding for this project, as provisional (P) or confirmed (C)				
			P/C			
2 EMERGENCY LIGHTS.	£ 336		£			
	£	<u> </u>	£			
	£		£			
	£		£			
	£		£			
	£		£			
	£		£			
	£		£			
	£		£			
TOTAL PROJECT EXPENDITURE	£336	TOTAL PROJECT INCOME	£ 0-00			
Total Project Income B Total Project Expenditure A		£ 0-00 £336.00				
Project Shortfall A - B		£336.00				
Award sought from Wiltshire Counci	l Area Board	£ 336.00				
Is your organisation able to claim VA	T?	Yes No No				
7 - Management						
How many people are involved in the	e managemen	t of your group/organisation?	-0			
People Over 50 years	Male 13	Female				
People Under 25 years	Male	Female				
Disabled People	Male 2	Female				
Black & Minority Ethnic people	Male	Female				
8 - Supporting Information - Please	anclose the	following documentation				
Enclosed (please tick)	. enclose the					
Latest inspected/audited accoun	ts or Annual R	eport				
Income & expenditure budget for	r current financ	ial year				
Project budget (if applicable)						
Terms of Reference/Constitution						
For new groups, only the group's te		ice and a projected income and exp	penditure budget			

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⇒ Equal Opportunities – To assist us with our equalities monitoring please indicate whether your application is specifically targeted at people within one or more of the six equality strands. You may tick yes for more than one category e.g. if your project is for ethnic minority senior citizens.						
Please note that by answering NO to any of the following questions WILL NOT PREJUDICE your application.						
a) Is your project targeted towards, or of particular relevance to, people of a specific age?						
☐ Yes ☑ No If 'Yes' please tick ☐ Under 25's ☐ Over 50's						
b) Is your project targeted towards, or of particular relevance to, people with disabilities (physical or mental/emotional)?						
☐ Yes ☑ No						
c) Is your project targeted towards, or of particular relevance to, people of a specific gender?						
☐ Yes ☑ No If 'Yes' please tick ☐ Male ☐ Female						
d) Is your project targeted towards, or of particular relevance to, people of a specific sexuality?						
☐ Yes ☑ No If 'Yes' please tick ☐ Gay ☐ Lesbian ☐ Bisexual						
e) Is your project targeted towards, or of particular relevance to, people from a specific ethnic background?						
Yes No If 'Yes', indicate the ethnic background of the people who will benefit from your project.						
White British Irish Other Mixed Mixed ethnic background						
Asian or Asian British 🗌 Indian 📗 Pakistani 🗍 Bangladeshi 🗍 Other Asian						
Black or Black British 🗌 Caribbean 📗 African 🗌 Other Black						
Chinese or other ethnic group Chinese Other ethnic group						
f) Is your project targeted towards, or of particular relevance to, people from a specific religion or faith?						
(e.g. a Muslim women's sports club, which encourages active participation, rather than promoting religious beliefs)						
☐ Yes ☑ No If 'Yes' please specify						
10 – Declaration (on behalf of organisation or group) – I confirm that						
Accounts and quotes where appropriate are enclosed. A copy of our constitution or terms of reference are enclosed. 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 or printed material. I give permission for press and media coverage by Wiltshire Council in relation to this project.						
Name: Position in organisation: Date:						
Please return your completed application to the appropriate Area Board Locality Team (see pages 9-10)						