



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	Semley Village Stores		
Contact name			
Contact address			
Contact number		e-mail	
Organisation type	Not for profit organisation <input checked="" type="checkbox"/> Parish/town council <input type="checkbox"/> Other, please specify		

2. Your project

Project Title/Name	Semley Village Stores		
What is your project about and what does it aim to achieve? <i>Important: This section is limited to 600 characters only (inclusive of spaces).</i>	<ul style="list-style-type: none"> • The shop will provide employment for local volunteers. • Local residents will benefit by having a shop within walking or bicycling distance. • We will offer a delivery service for elderly residents. • We will offer a drop off/pick-up point for parcels, plus basic post office facilities. • The shop will become an important local meeting point. • Several local producers are keen to sell their produce through the shop. • We will help Semley School to provide healthy lunches • Local business will have a noticeboard on which to advertise. 		
In which community area does your project take place? (Please give name – see section 3 of the grants pack)	Semley Village, Wiltshire		
I/we have discussed our project with the town/parish council?	Yes <input checked="" type="checkbox"/>	Date Ongoing	No <input type="checkbox"/>
I/we have discussed our project with our Wiltshire councillor?	Yes <input checked="" type="checkbox"/>	Date Several	No <input type="checkbox"/>

Where will your project take place?	Semley Village
When will your project take place?	Start November 2011
<p>How did you discover there was a need for your project (<i>please provide evidence</i>) and how will your project benefit your local community?</p> <p><i>Important: Please do not type/write in paragraphs – This section is limited to 1000 characters only (inclusive of spaces)</i></p>	<p>The former shop closed nearly ten years ago. It had been a very successful general stores and gift shop which offered a highly personal service including deliveries to weekenders and to older people who could not easily travel, and whose owners were popular with the whole village for their cheerful and welcoming manner. A village meeting was held on 8 April 2011 to see if a shop could re-open. It attracted more than 50 people who all supported the proposal. A single donor has generously bought the premises. There is very good retail space, very centrally located, and an upstairs room which will be let in the short term. A further questionnaire was completed by 52 residents, all demonstrating support for the project. A second meeting on June 17th drew around 60 people and led to the raising of £30,000. For evidence as to how the community will benefit, please see above.</p>
How many people will benefit from your project?	at least 500
<p>How does your project demonstrate a direct link to the local community plan for your area?</p> <p>www.wiltshire.gov.uk/areboards</p> <p>Please provide a reference/page no.</p>	<p>We aim to help in regenerating the local economy (through the shop and its suppliers), and to support community cohesion by providing a meeting point</p> <p>p7/8</p>
To be completed ONLY where town/parish councils are making an application	
Is your project one which parish/town councils have powers to raise local taxes to fund?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Could your project be funded from your reserves?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your project urgent (having to be completed in this financial year? <i>If you answer YES please provide evidence elsewhere on the application form</i>)	Yes <input type="checkbox"/> No <input type="checkbox"/>

Any other information about your project.

Please see attached business plan

3. Management**How many people are involved in the management of your group/organisation?**

Of these, how many are:

Over 50 years	Male	<input type="text" value="2"/>	Female	<input type="text" value="2"/>
25 – 50 years	Male	<input type="text" value="5"/>	Female	<input type="text" value="4"/>
Under 25 years	Male	<input type="text" value="0"/>	Female	<input type="text" value="0"/>
Disabled People	Male	<input type="text" value="0"/>	Female	<input type="text" value="0"/>
Black and Minority Ethnic people	Male	<input type="text" value="0"/>	Female	<input type="text" value="0"/>

If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it?

Only start up funding is required - the shop is expected to run itself within a year of opening

How will you know whether your project has made a difference in the community? What evidence will be collected to enable you to know that the project has made a positive impact on your community and met the local need?

The fact that the shop is being used and is generating good revenues will demonstrate that it is answering a need within the community. We have also created a website on which customers can record their comments and views.

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)?****Please list with amount applied for and whether you have been successful****Name of Funder****Amount Applied For****Amount Received**

Plunkett Foundation

20,000

0

Community First Landfill Fund

15,000

0

Sowing Seeds

5,000

0

<p>Have you or do you intend to apply for a grant from another area board within this financial year?</p> <p><i>If yes, please state which one(s).</i></p>	<p>Yes <input type="checkbox"/></p>	<p>No <input checked="" type="checkbox"/></p>	
<p>Are you in receipt or anticipating other funding from other Wiltshire Council departments for this project?</p>	<p>Yes <input type="checkbox"/></p>	<p>No <input checked="" type="checkbox"/></p>	

4. Information relating to your last annual accounts (if applicable)		
Year ending:	Month:	Year:
A - Total income:	£	
B - Minus total expenditure:	£	
Surplus/deficit for year: (A minus B)	£	
Free reserves currently held:	£	

5. Financial information – If you can claim back V.A.T. please exclude from figures given below

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	
Refurbish Stores	£32,000	Own fundraising/reserves	C	£30,000
External Works	£15,000	further fundraising	P	£10,000
Fit out interior	£23,850	Parish/town council	C	£200
Emplly Manager prior to opening	£1,500			£
Stock Shop	£8,000	Trusts/foundations	P	£40,175
Contingency Fund	£5,500			£
	£	In kind		£
	£			£
	£	Other		£
	£	AONB	C	£475
	£			£
	£			£
Total Project Expenditure	£85,850	Total Project Income		£80,850

Total project income B	£80,850
Total project expenditure A	£85,850
Project shortfall A – B	£5,000
Grant sought from Wiltshire Council Area Board	£5,000
Bank Details	
Please give the name of the organisations' bank account e.g. Barclays	Co-operative Bank
Please give the title name of the organisations' bank account e.g. current	Current

6. Supporting information – Please enclose all 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.
- 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 Equal opportunities
 - Access audit Environmental impact
 - Planning permission applied for (date)25/07/2011 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:

Date: 08/08/2011

Position in organisation:

Please return your completed application to the appropriate Area Board Locality Team (see section 3)