Section 4



Reference no

Log no

For office use

## Community Area Grant Application Form 2012/2013

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

To fund projects up to £1,000 without the need for matched funding
To fund up to 50% of projects costs of projects over £1,000

Maximum Grant £5,000

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 organisati	on or group
Name of organisation	FOVENT VILLAGE HALL (FVH)
Contact name	
Contact address	
Contact number	e-mail
Contact number	
Organisation type	Not for profit organisation Parish/town council Other, please specify
	Registered Charly No 1058917
2. Your project	
Project Title/Name	MODIFICATIONS TO RUCFING STRUCTURE OF VILLAGE HALL
What is your	
project about and	THE ITALL WAS BUILT MANY YEARS ARO AND TIME
what does it aim to	ROOF IS NOT INSULATED, FEME OF THE SUPPORTING
achieve?	TIMBERS ARE DELAPIDATED AS IS ITS HIPCHLANCE
Important: This	PARTICULARLY INTERNALLY THE PROJECT IS TO
section is limited to 600 characters only	ROMOVE, INSCLATE, REMEDY WHOLE NECESSARY AND
(inclusive of spaces).	REPLACE THE ROOF.
spaces).	
In which community a project take place? (F name – see section 3	Please give
l/we have discussed with the town/parish	
l/werhave discussed of with our Wiltshire cou	

Where will your project take place?	IN SITU AT HALL SITE	IN FOYANT
When will your project take place?	HOPERLY LAZER IN 2	013 (Summon PROF).
How did you discover there was a need for your project ( <i>please</i> provide evidence) and how will your project benefit your local community?	300, 31, 30	HAS VISIBLY
Important: Please do not type/write in paragraphs – This section is limited to 700 characters only (inclusive of spaces)		ä
How many people will benefit from	ALL USTRS - HALL IS US TIMES A WEEK . UP TO 6	ON AVERAGE S
your project?  How does your project demonstrate a direct link to the local community plan for your area? (see www.wiltshire.gov.uk/areaboards) or priorities of your area board)  Please provide a reference/page no.  Any other information about your pro	N/A. THE HALL IS, IN VITAL COMMUNITY FACI IS OUR DUTY AS TRUST AND IMPROVE ject. (Limited to a 1000 characters)	DUR VIEW, A LITY WHICH IT
To be completed ONLY where t		
To be completed ONLY where t	own/parish councils are making a	n application
Is your project one which parish/towr taxes to fund?		n application  Yes  No  No
Is your project one which parish/towr	councils have powers to raise local	

3. Management						
How many people are involved in the management of your group/organisation?  Of these, how many are:						
Over 50 years Ma	le 4.	Female 5				
25 – 50 years Ma	le	Female /				
Under 25 years Ma	le	Female				
Disabled People Ma	le 📄	Female				
Black and Minority Ethnic people Ma	le	Female				
If your project will continue after the Wiltshire Council funding runs out, how will you continue to fund it?  WE HAVE SOME RACINO - SEE ALCONTS - AND PORICE LARLY  17 AZE AND MASSING CYCNTS.						
How will you know whether your project collected to enable you to know that the local need?	t has made a diffe project has made	erence in the commun de a positive impact or	ity? What inform your communit	nation will be y and met the		
REFORMULE From Users	Ϋ́.					
Has Charities Information Bureau (CIB) helped you with this application/to seek funding for this project?	Yes []	Pate contacted CIB		No 🗹		
To whom have you applied for	Name of Funder		Amount Applied For	Amount Received		
funding for this project (other than Wiltshire Council)?	NONÉ					
Please <u>list</u> with amount applied for						
and whether you have been successful						
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 one(s).						
Are you in receipt or anticipating other funding from other Wiltshire Council departments for this project?	Yes []	No 🗹				

4. Information relating to your last annual accounts (if applicable)						
Year ending:	Month: MA	MCH Year: 2012				
A - Total income:	£ 7216					
B - Minus total expenditure:	£ 6198					
Surplus/deficit for year: (A minus B)	£ 1018					
Free reserves currently held (i.e. money not committed to other projects/operating costs)	E 5000 OF THIS SUM TOWN ON TEAR.					
5. Financial information – If you control of the volume of the view of the vie	an claim ba A.T then pl	ck V.A.T. please <u>exclude</u> VAT ease include V.A.T. in the figu	from th res you	e figures you provide us.		
Project Costs A Please provide a <u>full</u> breakdown e.g. eq installation etc.	uipment,	Project Income B Please list all sources of funding for this project, as provisional (P) or confirmed (C)				
			P/C			
PLOME NOTE : WE HAVE A	FOOO	Own fundraising/reserves (みくていかい)	C	£ 4000		
DATED ESTIMATE FOR JOHE				£		
OF THE WORK HOWEVER	£	Parish/town council		£		
WE ARE IN THE PROCESS OF	£			£		
OBTAINING UIDATED	£	Trusts/foundations		£		
CHIMATED FRM 1671NTIM	£			£		
CONTACTIONS FOR ALL	£	In kind		£		
MERCISAMY LINCKS INCLUSIN	R E			£		
INSCLATION.	£					
	£	Other		£		
	£			£		
Total Project Expenditure	£	Total Project Income		£		
Total project income B	£ 4000					
Total project expenditure A	£ 8000 (CATIMATOD)					
Project shortfall A – B	£ 4000					
Grant sought from Wiltshire Council Are	£ 4000					
Bank Details						
Please give the name of the organisatio account e.g. Barclays	ns' bank					
Please give the name of the organisations' bank account e.g. Chippenham Scouts						

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)  ONLY ONE PATILITIES 15					
All written quotes including the one(s) you are going to use - FOR PART OF WORK, AND DATE MARK LOIL IN ITAND					
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 - CHARITY Commission of School School DATOD 1981.					
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					
This application meets all 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 a grant is received, I will provide copies of <u>all</u> receipts and invoices associated with the grant and provide information and photographs to demonstrate how the grant was spent.					
☐ That any other form of licence or approval for this project has been received prior to submission of this grant application.					
□ That the necessary policies and procedures will be in place prior to the commencement of the project outlined in this application. ▷ ▷ ㅇ ·					
☑ Child Protection ☑ Safeguarding Adults ) Bu Activat Considered					
☐ Child Protection ☐ Safeguarding Adults ☐ Public Liability Insurance ☐ Equal opportunities ☐ Documention ☐ 84 Name					
✓ Access audit ✓ Environmental impact					
☐ Planning permission applied for (date) or granted (date) < ► / A .					
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:					
Position in organisation:					
Please return your completed application to the appropriate Area Roard Locality Team (see section 3)					

