Community Area Award Application Grant Application from North Wiltshire District Council							
Please ensure that you have read the Funding Criteria and Additional Guidance Notes before completing this form PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED							
1 – Your Organisation or Group							
Name of Organisation							
Contact Name							
Contact Address							
Contact Number							
E-mail							
Organisation type	Non-profit m	aking orga	nisation	□ocal Authority	□Other □		
2 – Your Project							
In which Community Area does your project take 1							
place? In which Parish does your project take place?							
What is your project?							
Where will your project take place?							
When will your project take place?							
Does your project demonstrate a direct li Community Plan for the area? If yes, please provide a reference/page no			Yes No				
Are you applying for Capital or Revenue Funding?			Capit Reve	al (over £500) nue			
If you are applying for Revenue funding, pleas confirm that your project will be completed by March 2007			Yes No				
What is the Community be		•			-		
Has your organisation reco	aived a	Yes /If	ves nlea	se provide details be	elow)		
previous award from this Council? No		•	• · · •				
Date & Amount of previous award/_/_			£				
Details of award							

3 - Additional information to support and strengthen your application e.g. consultation & community involvement							
4 – Financial information							
PROJECT COSTS Please provide a <u>full</u> break down e.g. equipment, installation etc.		PROJECT INCOME Please list sources of funding for this project, as provisional (P) or confirmed (C)					
			P/C				
	£			£			
	£			£			
	£			£			
	£			£			
	£			£			
	£			£			
Total Project Expenditure	£	Total Project Income		£			
Total Project Income		£					
Total Project Expenditure Project Shortfall		£					
Award sought from NWDC		£					
Is your organisation able to claim V	∼ Yes □ No □						
THE FOLLOWING INFORMATION MUST BE PROVIDED. FAILURE TO DO SO WILL RESULT IN THE APPLICATION BEING REJECTED							
q Please tick this box to indicate that you have included a signed off summary of examined accounts, confirming your year-end accounts, assets and reserves							
Section 5 - Declaration (on behalf of organisation or group)							
I confirm that 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 I confirm if an award is received that I will complete and return an evaluation sheet I confirm that the necessary any planning permission was granted _/_/_							
I confirm that any other form of licence or approval for this project has been received prior to							
submission of this application I confirm that the necessary policies and procedures will be in place e.g. Child Protection, Public							
Liability Insurance, Equal Opportunities etc prior to the commencement of the project outlined in							
this application							
I confirm that acknowledgement will be given of NWDC support in any							
publicity or printed material I give permission for press and media coverage by NWDC in relation to this project							
Name :		Date	JIUJECI				
Position in organisation :							
+ Please return your completed application to: Partnership Development Officer, Community &							
Environment, Monkton Park, Chippenham, Wiltshire, SN15 1ER or e-mail jmoody@northwilts.gov.uk							