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 G	roup											
Name of Organisation												
Contact Name												
Contact Address												
Contact Number												
E-mail												
Organisation type	Non-profit ma	aking orgai	nisat	ion [ocal .	Auth	ority			Othe	er 🗆
2 – Your Project												
In which Community Area oplace?	does your proj	ect take	1 [2		3 □	4		5 [
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 link to the 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		ver £	500)					
If you are applying for Revenue funding, please confirm that your project will be completed by 31 st March 2007			Yes No									
What is the Community be	nefit of your pi	oject, and	аррі	oxim	ater	y now	, mai	пу ре	eopie	· WIII	bene	ent?
NWDC will not meet future running costs for projects. Please tell us how these will be met in future.												
Has your organisation receprevious award from this C		□ Yes (If □ No	yes	, plea	se p	rovid	e de	tails	belo	w)		
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		PROJECT INCOME							
Please provide a <u>full</u> break down e.g. equipment, installation etc.		Please list sources of funding for this project, as provisional (P) or confirmed (C)							
			(0)	P/C					
	£			!	£				
	£				£				
	£				£				
	£				£				
	£				£				
	£				£ £				
Total Project Expenditure	£	Total Project Inco	me		<u>~ </u>				
Total Project Income		£							
Total Project Expenditure	£								
Project Shortfall		£							
Award sought from NWDC		£							
Is your organisation able to claim VAT? Yes No THE FOLLOWING INFORMATION MUST BE DROWNED FAILURE TO DO CO WILL BEST! TIN THE									
THE FOLLOWING INFORMATION MUST BE PROVIDED. FAILURE TO DO SO WILL RESULT IN THE APPLICATION BEING REJECTED									
☐ 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									
Position in organisation :		Date							
Please return your completed application to: Principal Community Partnership Officer, Community &									
Environment, Monkton Park, Chippenham, Wiltshire, SN15 1ER or e-mail mgilmour@northwilts.gov.uk									