



**3 – Additional information to support and strengthen your application e.g consultation, community involvement, energy efficiency measures**

(IMPORTANT: PLEASE DO NOT TYPE IN PARAGRAPHS – THIS SECTION IS LIMITED TO 1500 CHARACTERS ONLY (INCLUSIVE OF SPACES))

We hope the information leaflet will recruit new members and volunteers who will help maintain the two nature reserves at Conygre Mead and Wynyard Plantation. New members are encouraged to attend lectures/ events and they will receive our regular newsletter which educates and informs them about the maintenance of the reserves. We are able to demonstrate the history and links to the Abbey Fishponds in our reserves and recent history of the railway.

**4 - Financial Information**

PROJECT COSTS Please provide a <u>full</u> breakdown e.g equipment, installation etc.		PROJECT INCOME Please list all sources of funding for this project, as provisional (P) or confirmed (C)		
			P/C	
Including VAT	£260	The project produces no direct income but will hopefully increase subscriptions and donations		£
	£			£
	£			£
	£			£
	£			£
	£			£
<b>TOTAL PROJECT EXPENDITURE</b>	<b>£260</b>	<b>TOTAL PROJECT INCOME</b>		<b>£</b>

Total Project Income	£-
Total Project Expenditure	£260
Project Shortfall	£260
Award sought from NWDC	£260
Is your organisation able to claim VAT?	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>

**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.
- If an award is received that 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  Planning permission applied for (date) 24/06/08 or granted (date)
- 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: 23/07/2008  
 Position in organisation: \_\_\_\_\_



Please return your completed application to: Community Partnerships Team, Community Partnership, Monkton Park, Chippenham, Wiltshire, SN15 1ER or e-mail

