

Reference no
Log no

For office use

Community Area Grant Application Form 2010/2011

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

We strongly advise that you contact your Community Area Manager before completing your application.

1 - Your organisat	ion or group			
Name of		Council, Tommy Croker Memorial Playing Field		
organisation				
Contact name				
Contact address				
Contact number		e-mail		
Organisation type	Not for profit or	rganisation Parish/town council		
	Other, please s	pecify		
2 – Your project				
In which community a project take place? (F name – see section 3 pack)	Please give of the grants	Area 5 Calne		
Does your town/paris				
know about your proj	ect?	Yes ⊠ No □		
What is your project? Important: This section is limited to 300 characters only (inclusive of spaces).		The regeneration of the TCMPF replacing the existing very basic equipment which was installed in 1994 with more challenging units. Consultations open days have been held over the last 2 years with children and parents, village school, Scouting group, Parish development planners to ensure agreement		
Where will your proje	ct take place?	Tommy Croker Memorial Playing Field, Mill Lane , Cherhill, SN11 8XS		
When will your project take place?		December 2010- January 2011		
How many people wil your project?	I benefit from	245 children approx. plus visitors		
How does your project a direct link to the confor your area?	mmunity plan	Vision to idenify more things for the village youth to do, To maintain and enhance the play area		
Please provide a reference/page no.		page 25.		

What is the link between your project parish plans. We have the full backing og the Paris	•	· ·	, ,
How did you discover there was a rommunity?	need for your projec	et and how will you	ır project benefit your local
Important: Please do not type in pa spaces) I will provide this detail if you need		ction is limited to 1	200 characters only (inclusive of
Please refer to following question			
Any other information about your p We thought we had all the funding in p Field £ 41470		our regeneration of t	he tommy Croker Memorial Playing
Grassroots	£ 5000, £22000		
	£ 9400 £ ??		
But at this time is seems that we are understanding Governments proposed cuttings	unlikley to receive the	Playbuilder money	as they are subject to the
The £5000 area 5 grant we are applyi	ng for is to help fill ou	ur funding gap	
3 - Management			
How many people are involved in the Of these, how many are:	he management of y	our group/organis	sation?
Over 50 years	Male 2	Female 1	
25 - 50 years	Male	Female 3	
Under 25 years	Male 2	Female 2	
Disabled People	Male	Female	
Black and Minority Ethnic people	Male	Female	
fund it?	ion of the play area a	and equipment if not g for other groups no	

If you were not awarded the full amount	requested, what wo	uld be the impact on your project?		
To look for other funding opportunities for	next year			
How will you know whether your project	t has made a differer	nce in the community?		
We intend to hold an open day to make all we will ask for feed back	the community aware	of what is now available for the children . At which		
Have very contacted Charities				
Have you contacted Charities Information Bureau for help with your application/ to seek funding?	Yes 🖂 N	o 🗌		
To who have you applied for funding	Grassroots, Community Foundation, Devizes £ 5000			
for this project (other than Wiltshire Council)?	Hills Landfill Communities Fund Scheme £22,000 Viridor Landfill Communities Fund Scheme £ 9400			
Have you been successful?	Yes 🖂 N	o 🗌		
Have you or do you intend to apply for a grant from another area board within this financial year?	Yes N	o ⊠		
If yes, please state which ones.				
Are you in receipt or anticipating other funding from Wiltshire Council for this project?	Yes N	o 🖂		
4 - Information relating to your la	st annual accoun	ts (if applicable)		
Year ending:	Month:	Year:		
A - Total income:	£	•		
B - Minus total expenditure:	£			
Surplus/deficit for year: (A minus B)	£			
Free reserves held:	£			

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	
	£	Own fundraising/reserves		£
See attached Quote from the	£			£
Childrens Playground Company	£46,470	Parish/town council		£5,070
PN UK 10759 27-09-10	£	Trusts/foundations		£
	£	Trusts/fouridations		£
	£	In kind		£
	£			£
	£	Other		£
	£	Grassroots		£5,000
	£	Hills Viridor		£22.000
	£	Wiltshire Council Playbuilder		£9,400 £0
Total Project Expenditure	£46,470	Total Project Income		£41,470
Total Froject Experiance	240,470	Total Froject moonie		2-1,-70
Total project income B		£41,470		
Total project expenditure A		£46,470		
Project shortfall A – B		£5,000		
Award sought from Wiltshire Council	Area Board	£5,000		
Bank Details				
Please give the name of the organisa account e.g. Barclays	tions' bank	Lloyds TSB Bank (Chippenham)	, PO Box ´	1000, BX11CT
Please give the title name of the organisations' bank account e.g. current		Treasurers Account, Cherhill P C acc,no 01572436		
6 - Supporting information - F	Please enclo	se the following document	ation	
Written quotes including the one y	ou are going to	1190		
Latest inspected/audited accounts				
☐ Income and expenditure budget for	·			
Project budget (if applicable)	or current findin	olal yeal		
_	roup rulos			
Terms of reference/constitution/g	·	and		
Evidence of ownership/lease of bu	_			
		e and a projected income and ex		

through the Area Boards benefits all sections of our community and prand inclusion. To assist us in assessing how your application aims to commitment to equality and inclusion, please provide a brief answer to	romotes equality meet our
 a) How does your project work to either (a) promote equality and access to serv (b) reduce disadvantage? 	ices/facilities, and/or
ОК	
b) How does your project work to promote inclusion, participation and good cor	mmunity relations?
A facility for all parents and children from the community	
c) Is your project targeted at a specific group? If yes, please tick any of the follo	wing which apply
☐ Under 25's ☐ Over 50's	
☐ Mostly or all men/boys ☐ Mostly or all women/girls	
☐ Specific minority ethnic groups (please state which groups)	
☐ Specific faith groups (please state which groups)	
People/families on low income	
Other disadvantaged groups (please state which groups)	
8 - Declaration (on behalf of organisation or group) – I confirm that	
I have read the funding criteria	
 ☑ I have read the funding criteria ☑ The information on this form is correct, that any award received will be spent on the specified, that I will complete a monitoring form (if requested) following completions. 	
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