



Reference no
Log no
<b>For office use</b>

# Area Board Projects and Councillor Led Initiatives Application Form 2017/2018

**To be completed by the Wiltshire Councillor leading on the project**  
Please ensure that you have read the Funding Criteria before completing this form  
**PLEASE COMPLETE ALL SECTIONS TO ENSURE THAT YOUR APPLICATION CAN BE CONSIDERED**

<b>1. Contact Details</b>	
Area Board Name	Chippenham
Your Name	
Contact number	e-mail
<b>2. The project</b>	
Project Title/Name	Installation of Kissing Gates in Chippenham Community Area
<b>Please tell us about the project /activity you want to organise/deliver and why?</b>  <i>Important: This section is limited to 900 characters only (inclusive of spaces).</i>	Form a task group and work with Rights of Way Officer and invite suggestions for locations to: <ul style="list-style-type: none"> <li>• Replace existing stiles that restrict access</li> <li>• Replace existing open/shut park gates to create a safer environment particularly for small children and dogs. E.g.: A recent dog fatality when a dog chased a pigeon out of a park through an open gate and was killed on the road</li> <li>• Install to reduce illegal vehicular/motorbike access</li> <li>• Install in new locations to address damage to fencing E.g. A location where fencing is repeatedly broken and pulled down to enable shortcut to be taken; this is dangerous as children and animals may run out on to a busy road when the fence is pulled down. The installation of a gate will avoid the need for multiple repairs</li> <li>• This project will cover the town and surrounding parishes in the Chippenham Community Area</li> </ul>
Where is this project taking place?	Chippenham Community Area
When will the project take place?	As soon as funding is secured
What evidence is there that this project/activity needs to take place/be funded by the area board?	Requests from members of the public Priorities identified in both the Wiltshire Council Business Plan and Chippenham Our Community Matters JSA event

<b>How will the local community benefit?</b>	Improved access by replacing existing stiles. Safer environment created by replacing existing open/shut gates and introducing where there is repeated damage to fencing to achieve shortcut. The prevention of illegal access by vehicles. Better countryside access and opportunities for walking. Town & Parish Councils will normally be expected to contribute approx 25% to any Kissing Gates installed in their area		
<b>Does this project link to a current Community Issue?</b> (if so, please give reference number as well as a brief description)	N/A – See Chippenham Our Community Matters JSA event 2017 listed below		
<b>Does this project link to the Community Plan or local priorities?</b> (if so, please provide details)	Business Plan 2017-27; Strong Communities, Good Countryside access, cycling and walking opportunities. Chippenham Our Community Matters JSA event 2017: Improving rights of way, Protecting the countryside, Positive leisure time activities, Local landscape & heritage, Cycling & walking,		
<b>Is this project supported by the Local Youth Network or Community Area Transport Group?</b> (if it relates to young people or highways and transport)	N/A		
<b>What is the desired outcome/s of this project?</b> Improve access and walking opportunities, prevent damage to fencing, illegal vehicular access and accidents			
<b>Who will be responsible for managing this project?</b> Kissing Gates Task Group			
<b>3. Funding</b>			
<b>What will be the total cost of the project?</b>	£6,000		
<b>How much funding are you applying for? Please note that only capital funding is available</b>	£6,000		
<b>If you are expecting to receive any other funding for your project, please give details</b>	<b>Source of Funding</b>	<b>Amount Applied For</b>	<b>Amount Received</b>
	Town & Parish Councils 25% of cost		
<b>Please give the name of the organisation and bank account name (but not the number) your grant will be paid in to.</b> (N.B. We cannot pay money into an individual's bank account)			
<b>4. Declaration – I confirm that...</b>			
<input checked="" type="checkbox"/> The information on this form is correct and that any grant received will be spent on the activities specified  <input checked="" type="checkbox"/> Any form of licence, insurance or other approval for this project will be in place before the start of the project outlined in this application			
<b>Name:</b>		<b>Date:</b> 8-Mar-2018	
<b>Position in organisation:</b> Chippenham Area Board Councillor			
<b>Please return your completed application to the appropriate Area Board Locality Team (see section 3)</b>			