



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>	
<b>Area Board Name</b>	Trowbridge
<b>Your Name</b>	Councillor Graham Payne
<b>Contact number</b>	<b>e-mail</b> Graham.payne@wiltshire.gov.uk
<b>2. The project</b>	
<b>Project Title/Name</b>	Trowbridge Carnival and community event storage container
<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>	<p><b>Background:</b> Trowbridge Carnival Committee is a group of local residents that every year plans, organises and manages delivery of the Carnival and associated events for the local community.</p> <p><b>The project:</b> The project is to provide storage facilities for the Carnival Committee and Wiltshire Armed Forces Committee. Organising such large community events requires a considerable amount of equipment including road closure signs, traffic cones, pedestrian barriers, sandbags, chairs, gazebos, track mats etc. Currently many of these items are stored in the open risking loss through theft, damage, rust and general deterioration. A secure storage container is required to enable safe and secure storage of the equipment. Land upon which to site the facility has been identified and agreed for this use by Trowbridge Town Council.</p>
<b>Where is this project taking place?</b>	Trowbridge
<b>When will the project take place?</b>	asap
<b>What evidence is there that this project/activity needs to take place/be funded by the area board?</b>	There is a need to keep equipment safe and secure. Dry and secure storage will prolong and preserve the life of the equipment for community benefit in putting on our annual and well supported community events.

<b>How will the local community benefit?</b>	The local community will benefit from well run community events with appropriate equipment on hand and in good condition to meet requirements around crowd control, road safety and people management		
<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		
<b>Does this project link to the Community Plan or local priorities?</b> (if so, please provide details)	The project links to JSA priorities around providing opportunities to bring communities together and create opportunities for this.		
<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>	Continued delivery of safe and well managed community events through safe and secure storage of necessary equipment.		
<b>Who will be responsible for managing this project?</b>	Trowbridge Carnival Committee		
<b>3. Funding</b>			
<b>What will be the total cost of the project?</b>	£4992 (£3850 +£310 delivery +VAT)		
<b>How much funding are you applying for? Please note that only capital funding is available</b>	£3842		
<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>
	Trowbridge Carnival Committee	£400	£400
	WAF Committee	400	400
	Volunteer time to move and store	250	250
<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)	Account Name: Trowbridge Carnival Committee Sort code: 40.44.33 Account Number		
<b>4. Declaration – I confirm that...</b>			
<b>Yes</b> the information on this form is correct and that any grant received will be spent on the activities specified			
<b>Yes</b> 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> Graham Payne			<b>Date:</b> 20.11.2018
<b>Position in organisation:</b> FOBM Projects lead			

Please return your completed application to the appropriate Area Board Locality Team ([see section 3](#))