Wiltshire Council Where everybody matters

Reference no

Log no

For office use

Area Board Projects and Councillor Led Initiatives Application Form 2018/2019

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					
1. Contact Details					
Area Board Name	Chippenham				
Your Name	Councillors Peter Hutton & Howard Greenman				
Contact number		e-mail <u>Peter.hutton@wiltshire.gov.uk</u> <u>Howard.Greenman@wiltshire.gov.uk</u>			
2. The project					
Project Title/Name	Community Saf	Cety Initiatives & Activities			
Please tell us about the project /activity you want to organise/deliver and why? Important: This section is limited to 900 characters only (inclusive of spaces).	 Chipper Chipper 	al community safety initiatives and activities: ham Street Pastors ham Defibrillator Project h the Chippenham Community Area			
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 Wiltshire Council Business Plan 2017 – 2027 and Chippenham Our Community Matters JSA Event Feb 2017			

How will the local community benefit?	Continued support from Street Pastors: Night Patrols, Response Pastors and Day Pastors. Continued introduction of defibrillators across the community area of benefit to the Health & Wellbeing of residents Continued action to address incidents of Fly tipping Maintaining Purple Flag Status to ensure the town remains a safe place				
Does this project link to the Community Plan or local priorities? (if so, please provide details)	Chippenham Our Community Matters JSA Event Feb 2017 Maintaining Purple Flag Status, work with a range of partners to ensure the town remains a safe place Wiltshire Council Business Plan 2017- 2027 – Safe Communities				
Is this project supported by the Local Youth Network or Community Area Transport Group? (if it relates to young people or highways and transport	N/A				
What is the desired outcome/s of this project? To sustain ongoing Street Pastors activities, continue to support the installation of defibrillators across the community area and to continue to address the issue of fly tipping					
Who will be responsible for managing this					
3. Funding					
What will be the total cost of the project? $\pounds 3,200$					
How much funding are you applying for? Please note that only capital funding is available					
If you are expecting to receive any other funding for your project, please give details	Source of Funding	Amount Applied For	Amount Received		
Please give the name of the organisation and bank account name (but not the number) your grant will be paid in to. (N.B. We cannot pay money into an individual's bank account)	N/A				
4. Declaration – I confirm that					
 ✓ The information on this form is correct and that any grant received will be spent on the activities specified ✓ 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 					
Name: Position in organisation: Councillors Chip	Date: Januar	y 2019			
Please return your completed application to the appropriate Area Board Locality Team (see section 3)					