



## Community Area Grant Application Form 2011/2012

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

**For larger projects we strongly advise you to contact Charities Information Bureau three months before you approach the area board. (See Section 2 for contact details)**

**Please contact your Community Area Manager before completing your application  
(See Section 3 for contact details)**

### 1. Your organisation or group

<b>Name of organisation</b>	Great Hinton Memorial Hall & Community Committee - GHMH&CC		
<b>Contact name</b>			
<b>Contact address</b>			
<b>Contact number</b>		<b>e-mail</b>	
<b>Organisation type</b>	Not for profit organisation <input checked="" type="checkbox"/> Parish/town council <input type="checkbox"/> Other, please specify		

### 2. Your project

<b>Project Title/Name</b>	Acquisition and Installation of Automated External Defibrillator.		
<b>What is your project about and what does it aim to achieve?</b>  <i>Important: This section is limited to 600 characters only (inclusive of spaces).</i>	To acquire an Automated External Defibrillator (AED). It will be situated outside the Great Hinton Village Hall, which is central to the village and accessible to every household in the Parish. It could also be of potential value to other nearby communities, eg Keevil and Steeple Ashton. The unit is weatherproof, vandalproof and accessed by keycode provided by a 999 call. Overall cost of the project is £1820. A50% grant (£910) is sought, with villagers covering the remaining 50% and the downstream costs (new battery & pads every 3years) from reserves and by fund-raising.		
<b>In which community area does your project take place? (Please give name – see section 3 of the grants pack)</b>	Summerham and Seend		
<b>I/we have discussed our project with the town/parish council?</b>	Yes <input checked="" type="checkbox"/>	<b>Date</b> 10/01/12	No <input type="checkbox"/>
<b>I/we have discussed our project with our Wiltshire councillor?</b>	Yes <input checked="" type="checkbox"/>	<b>Date</b> 18/01/12	No <input type="checkbox"/>

Where will your project take place?	Great Hinton Village
When will your project take place?	April-December, 2012
How did you discover there was a need for your project ( <i>please provide evidence</i> ) and how will your project benefit your local community?  <i>Important: Please do not type/write in paragraphs – This section is limited to 1000 characters only (inclusive of spaces)</i>	Under the auspices of the GHMH&CC, a substantial group of villagers has been presented with information from the Community HeartBeat Trust (a national charity providing life saving defibrillation services to local communities) explaining the real advantages of rapid access to an AED in cases of cardiac arrhythmias of ventricular fibrillation and ventricular tachycardia. Advice and instruction on the use of AEDs has also been provided by Dr Stephen Locke, a resident of Great Hinton, with emphasis on the ease of use by a non-medical lay-person. As a result, there is a strong desire by the community to acquire a unit for deployment in a central location for the potential benefit of all residents in the Parish and in nearby villages. The deployment of AEDs in local communities is growing, and is well-supported by the Ambulance Service. The rapid use of such devices in the case of cardiac arrhythmia substantially reduces the probability of irreversible brain damage and death.
How many people will benefit from your project?	Parish of Great Hinton
How does your project demonstrate a direct link to the local community plan for your area? <a href="http://www.wiltshire.gov.uk/areboards">www.wiltshire.gov.uk/areboards</a>  Please provide a reference/page no.	Community plan identifies high stroke frequency. Project will provide significant reduction on impact of cardiac arrhythmia in local population.  Melksham community plan -p14
<b>To be completed ONLY where town/parish councils are making an application</b>	
Is your project one which parish/town councils have powers to raise local taxes to fund?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Could your project be funded from your reserves?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is your project urgent (having to be completed in this financial year? <i>If you answer YES please provide evidence elsewhere on the application form</i> )	Yes <input type="checkbox"/> No <input type="checkbox"/>
Any other information about your project.	

### 3. Management

How many people are involved in the management of your group/organisation?  
Of these, how many are:

Over 50 years	Male	<input type="text" value="2"/>	Female	<input type="text" value="2"/>
25 – 50 years	Male	<input type="text"/>	Female	<input type="text"/>
Under 25 years	Male	<input type="text"/>	Female	<input type="text"/>
Disabled People	Male	<input type="text"/>	Female	<input type="text"/>
Black and Minority Ethnic people	Male	<input type="text"/>	Female	<input type="text"/>

If your project is intended to continue after the Wiltshire Council funding runs out, how will you continue to fund it?

Downstream costs for essential maintenance (replacement batteries and pads, testing, etc) will be covered by further fund-raising, but will in any case be underwritten by the Great Hinton Parish Council.

How will you know whether your project has made a difference in the community? What evidence will be collected to enable you to know that the project has made a positive impact on your community and met the local need?

The most compelling evidence of success will be when the AED is used in earnest, thus preserving a life. In the mean time, the very presence of the AED in the parish will give residents, particularly the elderly, a sense of security.

Have you contacted Charities Information Bureau for help with your application/ to seek other funding?

Yes

Date

25/01/12

No

To whom have you applied for funding for this project (*other than Wiltshire Council*)?

*Please list with amount applied for and whether you have been successful*

Name of Funder

Amount Applied For

Amount Received

See "Additional Information"

Have you or do you intend to apply for a grant from another area board within this financial year?

*If yes, please state which one(s).*

Yes

No

Are you in receipt or anticipating other funding from other Wiltshire Council departments for this project?

Yes

No

4. Information relating to your last annual accounts (if applicable)		
Year ending: 31/03/12	Month:	Year:
A - Total income:	£531.56	
B - Minus total expenditure:	£472.65	
Surplus/deficit for year: (A minus B)	£58.91	
Free reserves currently held:	£927.46	

**5. Financial information – If you can claim back V.A.T. please exclude from figures given below**

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	
Acquisition of AED	£1,775	Own fundraising/reserves		£910
Provision of electrical supply	£45			£
	£	Parish/town council		£
	£			£
	£	Trusts/foundations		£
	£			£
	£	In kind		£
	£			£
	£	Other		£
	£			£
	£			£
	£			£
<b>Total Project Expenditure</b>	<b>£1,820</b>	<b>Total Project Income</b>		<b>£910</b>

<b>Total project income B</b>	£910
<b>Total project expenditure A</b>	£1,820
<b>Project shortfall A – B</b>	£910
<b>Grant sought from Wiltshire Council Area Board</b>	£910
<b>Bank Details</b>	
<b>Please give the name of the organisations' bank account e.g. Barclays</b>	
<b>Please give the title name of the organisations' bank account e.g. current</b>	

**6. Supporting information – Please enclose all the following documentation as failure to do so may lead to a delay in your application being considered**

**Enclosed (please tick)**

- Written quotes including the one(s) you are going to use
- Latest inspected/audited accounts or annual report or Income/expenditure budget for current financial year
- Terms of reference/constitution/group rules
- Evidence of ownership/lease of buildings and/or land

**For new groups, only the group's terms of reference and a projected income and expenditure budget covering a period of 12 months is required.**

**7. Declaration (on behalf of organisation or group) – I confirm that...**

- I have read the funding criteria
- 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, 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  Safeguarding Adults
  - Public Liability Insurance  Equal opportunities
  - Access audit  Environmental impact
  - Planning permission applied for (date) or granted (date)
- That acknowledgement will be given of Wiltshire Council support in any publicity, printed or website material.
- I give permission for press and media coverage by Wiltshire Council in relation to this project.

**Name:**

**Date:** 21/02/2012

**Position in organisation:**

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