Grant Application Form:   
Applications over £2,000

**Note:** Before completing this form please read the relevant guidance documents. Please either type your answers into a saved version of the form, or hand write in BLOCK CAPITALS. For an application pack in an alternative format, please call the Funding Coordinator (01243) 534864 or funding@chichester.gov.uk.

**You must contact a Funding Adviser before completing the application form.** This will help you with completing the form and will avoid delays in processing your application. If you do not contact a Funding Adviser, the application will be returned unassessed.

**Name of Funding Adviser you spoke with and date**:

# Section 1: ABOUT YOUR ORGANISATION

1. **Full name of your organisation or group**

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| --- |
|  |

**2. Full address, including the full postcode**

|  |
| --- |
| Address:  Telephone number:  Organisation’s E-mail:  Website: |

**3. Contact for this application** (This person should sign the Declaration in Section 4)

|  |  |  |  |
| --- | --- | --- | --- |
| Title:       Full Name: | | Position in organisation: | |
| Address for correspondence (if different to above): | | | |
| Telephone (daytime):  Best time to call: | E-mail: | | Any communication needs? (e.g. Textphone) |

**4.** **What type of organisation are you?**

|  |
| --- |
| Informal Group\*  Constituted Organisation  (\*Provide details and named contact of constituted group who will act as sponsor at ‘Other’ below)  Registered Charity  Charity Number  Company Limited by Guarantee  Company Number  Community Interest Company  Other |

**5. More about your organisation**

|  |
| --- |
| **(i) What are the aims and objectives of your organisation?** |
| **ii) What are your main activities?** |

**6. How many people are involved in your group or organisation?**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **(i) Tell us how many are:**   |  |  |  |  |  |  |  |  | | --- | --- | --- | --- | --- | --- | --- | --- | | Members/Users |  | Volunteers |  | Committee/  Board |  | Employees |  | | Other (please specify) | |  |  |  |  |  |  |   **(ii) Is anyone in your organisation (senior staff/Trustees/Directors) related to any Councillor or employee of Chichester District Council?** No  Yes  If yes, please provide name(s) and state relationship. |

# Section 2: ABOUT YOUR PROJECT OR SERVICE

**7. What’s the name of the project or service that you are applying for funding for?**

|  |
| --- |
|  |

**8. Which of the Council’s priorities for funding does your project address?**

|  |  |
| --- | --- |
| Please tick only **one** of the options listed below: | |
| **Economy**  To support projects that brings forward inward investment.  To support viable start-up and existing SMEs (small and medium sized enterprises) to implement ‘growth’ projects which require:   * **relocation and/or expansion into larger premises within the district** * **or occupation of long-term vacant commercial premises** * **significant investment to develop/grow market share** |  |
| **Improving Places and Spaces**  Improvements to publicly owned space or built assets that enhance the wellbeing of local residents, or publicly accessible spaces that improve the habitats of the District’s wildlife. |  |
| Stronger Communities Funding for voluntary and community services delivering projects supporting vulnerable people who have been most impacted by current social and economic pressures. |  |

**9. Tell us about your project or service.**

|  |
| --- |
| **(i) Please give a brief description of the project or service and its purpose** (refer to how it meets the Funding Priority). |
| **(ii) What is the total cost of your project**? £ |
| **(iii) What amount are you requesting from this bid?** £  What would this grant be used for? |

**10. When are you planning your project or service to take place?** (month/year)

|  |
| --- |
| When will it start:    /    When will it finish    /    Or, it is ongoing?  Will you need longer than 12 months from award to spend the grant?  No  Yes  If yes, please discuss this with your Funding Adviser and tell us below how long you would like a grant offer valid or to recur for? |

**11.** **Who will use or benefit from your project or service?**

|  |
| --- |
| **(i) How many people from Chichester District Council’s boundary area do you estimate will benefit from your project or service?**  Approximate total:  **(ii) Where do/will most of these people come from?** (village/parish area) |

**12. Project need**

|  |
| --- |
| **(i)** **Explain the problem or issues your project aims to address.**    **(ii) What evidence do you have to show that your project is needed? Refer to any independent research, statistics or survey results available.**    **(iii) Tell us where the nearest similar service, facility or project is and how it differs or compliments your proposals.** |

**13. What difference are you intending to make?** Tell us the lasting benefit or long-term difference you expect as a result of this project. Please also specify intended outcomes and how you will monitor them (see guidance notes for more information).

|  |
| --- |
| Overall impact:  List outcomes below:  **(i)**  **(ii)**  **(iii)** |

**14. Is your project/service aimed at supporting people who you consider to be disadvantaged or vulnerable?**  No  Yes

If yes, please provide details in the space below and if you are applying under “Stronger Communities” please also tell us how these beneficiaries are impacted by current social and economic pressures.

|  |
| --- |
|  |

**15. Is your project going to increase participation or create employment?** No  Yes  If yes, please provide details in the space below.

|  |
| --- |
|  |

**16. Managing your project’s climate impact** (please refer to the guidance for an explanation of climate impact and suggested considerations).

|  |
| --- |
| **(i)** **Almost every activity will have some climate impact, tell us what impacts your planned project has**.    **(ii) How have you designed the project to minimise its climate impact?** Your response could include what different approaches you considered to delivering the project, how you intend to manage the use of resources (energy, travel, supplies), or reusing equipment.    **(iii) Tell us if your organisation (locally or national body) has wider plans to minimise its climate impact and what these are?** |

# Delivery and management

## 17. Who are you working with to deliver your project or service?

## (Other groups, organisations, businesses)

|  |
| --- |
| **(i) Identify partner or supporter organisations here:**  **(ii) How will the project or service be managed?** |

**18. Tick below to indicate if your group or organisation has any of the following?**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| |  |  | | --- | --- | | * Health and Safety policy | Yes  No  or N/A | | * Safeguarding policy (Child and/or Adult) | Yes  No  or N/A | | * Affiliation to a governing body   If yes, tell us who | Yes  No  or N/A | | * Public liability insurance | Yes  No  or N/A | | If yes, please indicate the value here £ |  | | * Other insurance | Yes  No  or N/A | | If yes, identify what here | | | * Licence or permission for statutory activity | Yes  No  or N/A | | If yes, please explain what here | | |

**19. Does your project involve building or landscaping work?**

|  |  |  |
| --- | --- | --- |
| No  Yes  If you answer ‘no’ go to Q.20, if ‘yes’ tick the relevant boxes below. | | |
| **(i) Does your organisation:** | | |
| Own the freehold of the land or building  or  Hold a lease (If yes, please include length of lease remaining       ) | No  No | Yes  Yes |
| **(ii) Is planning consent needed for your project?** | No | Yes |
| If yes, please confirm that planning permission has been granted  - App. number is | | Yes |
| **(iii) Do you need the landowner’s permission?** | No | Yes |
| Permission obtained? (Please attach evidence) |  | Yes |

Section 3: FINANCE & MANAGEMENT

## Summary of your organisation’s financial information

**20. Provide the following details from your most recent annual accounts:**

(Alternatively, provide these details from the accounts of your sponsoring organisation).

Please note, you still need to submit copies of accounts with this application.

|  |  |  |  |
| --- | --- | --- | --- |
| (i) Account summary: Date (day/month/year)       /       / | | | |
| **(ii)** | Total (gross) income | £ |  |
|  | Total expenditure | £ |  |
|  | Balance at year end | £ |  |
|  | Savings (reserves, cash, investments) | £ |  |
| **(iii) How much money is earmarked for special purposes?** £  **What is it for?** (or attach your Reserves Policy): | | | |
| (iv) Do you request subscriptions for access to your services? No  Yes  If yes, what do you charge? £ | | | |
| **(v) Are you VAT registered?** No  Yes   **Otherwise exempt VAT?** No  Yes  **(vi) Are you able to reclaim all or part of any VAT liability?** All  Part  None | | | |

### 21. Has your organisation received funding from Chichester District Council in the last 5 years?

### No Yes If yes, please provide details in the table below.

|  |  |  |
| --- | --- | --- |
| Date (m/y) | Amount (£) | Project |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

22. Identify who else supports your project, people or groups and give details of any “in kind” support confirmed.

|  |
| --- |
|  |

**Breakdown of the funding request**

**23. Please list all likely costs for your service or project, you can either use the table below or attach a numbered separate sheet (but don’t forget to address both Section A and B of this question).** If your application is for capital costs, remember you will need to provide quotes to support this part of your application. A completed example of this table is given for you in the guidance document. Costs should be net if you can reclaim VAT.

|  |  |  |  |
| --- | --- | --- | --- |
| Section A: Project or Service Budget Breakdown | | Section B: How your project is funded | |
| *Item or activity* | Item/ activitycost | CDC contribution (this application) | Other contributions(£, from where, secured?) |
|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
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|  |  |  |  |
|  |  |  |  |
| **TOTALS** | **£** | **£** | **£** |

**24. If the table shows a shortfall, please state where the rest will come from. If your project or service involves annually recurring costs, explain how you plan to meet these in the future. What would happen if this bid is unsuccessful?** **Please provide a copy of your business plan and/or fundraising strategy.**

|  |
| --- |
|  |

# Section 4: SIGNING-OFF YOUR APPLICATION

25. If you are an informal group, your Sponsor organisation representative should complete the declaration below (if you are a formal group go to Q26):

|  |
| --- |
| On behalf of (insert organisation name)  I confirm that I have read and support this application for funding and am willing to be contacted to discuss it. Our organisation is willing to support the bid as sponsor.  Name:       Signed:       Date: |

**26. For all applicants. The main contact (identified at Q3) should complete the declaration below:**

|  |
| --- |
| **On behalf of the organisation identified at Q1, I declare that**:  I am authorised to make this application. I have read, understood and completed the application in line with the guidance notes and criteria available. All the information and supporting documentation I have provided is truthful and accurate.  I declare that if a grant or concession is awarded, that the money will be used solely for the purposes outlined in this application and that proof of this will be returned to the Council for monitoring purposes.  If details of the project or service change, I will notify the Council’s contact officer.  Please note: To comply with the GDPR we also require you to sign this document to acknowledge that your contact details will be stored on a secure database. The information will not be provided to any other organisation unless required to by law. The Council reports funding decisions and these are published on our website, applicant organisations’ names, the decision and a brief project description will be shown.  Important information for businesses: Under British “Subsidy Control” rules, contractors should not obtain more than the current total aid level - currently £315,000 - from other Government Departments or local authorities over a rolling 3-year period. I have read the above and confirm that we have not received aid above the relevant level, as above  (please tick). I hereby give Chichester District Council permission to receive information regarding any financial status/dispute which is available through other District Council Services  (please tick)  Signed:       Date: |

# 27. CHECKLIST

Please tick off the following checklist to confirm that your application is ready:

(please tick)

* + I have spoken to a Funding Adviser
  + I have answered all the relevant questions on the application form
  + I have taken a copy of the application for our reference
  + I have enclosed as appropriate:
    - A copy of our constitution or other governing document
  + Copies of our (or our Sponsor’s) audited accounts or equivalent for the last 2 years
  + A copy of our latest balance sheet
  + A copy of a recent bank statement (current and investment)

Please note: If you need to redact parts of the bank statement for GDPR reasons

please ensure we can check: the bank account name, the account number, the

balance and the postal address that the bank holds for the account.

* + A copy of our equalities, child protection or other relevant policies (see Q.18)
  + Written estimates relating to the cost of the project
  + Any evidence of support from the local Parish/Town Council
  + Written permission of Landowner for the project (see Q18)

**For Building/Landscaping Projects only:**

• Proof of freehold ownership or security of tenure

• Quotes for the work (we prefer to see 3 quotes)

• Copies of planning consent if available

**For applications over £10,000 or recurring funds:**

• A business or project plan including a financial forecast covering the period must be

provided

**Thank you for completing this form, please send it to us either electronically to** [**funding@chichester.gov.uk**](mailto:funding@chichester.gov.uk) **or by post**

**(the address details are in guidance ‘How to complete the grant Application Form’).**