**COMMUNITY FUND**

**APPLICATION FORM**

**1 ABOUT YOU AND YOUR ORGANISATION**

**1.1 ORGANISATION DELIVERING THE PROJECT**

**Please tell us about the organisation that will be delivering the project.**

|  |  |
| --- | --- |
| Name of organisation |  |
| Organisation address and postcode |  |

**1.2 MAIN CONTACT DETAILS**

**This should be the person with the legal responsibility for delivering the project.**

|  |  |
| --- | --- |
| Name of main contact |  |
| Address and postcode |  |
| Tel no. and email |  |

**1.3 SECOND CONTACT DETAILS**

**This should be a person who is able to discuss the application.**

|  |  |
| --- | --- |
| Name of second contact |  |
| Address and postcode |  |
| Tel no. and email |  |

**1.4 FURTHER DETAILS ON YOUR ORGANISATION**

**Please tell us about the organization that will be delivering the project.**

|  |  |
| --- | --- |
| Type of organisation \*  **\*please see guidance and select** |  |
| What is the purpose of your organisation? |  |
| In which areas of Gosport does your organisation work? |  |
| Does anyone in your organisation have any direct link with Gosport Borough Council (for example officers, councillors, contracts)? |  |

**1.5 ORGANISATION POLICIES**

**Please tell us if you have the following policies in place.**

|  |  |
| --- | --- |
| If your organisation is involved with children, young people or vulnerable persons, please tick if you have a safeguarding policy in place (if applicable) |  |
| Please tick if your organisation has an equalities and diversity policy in place (if applicable) |  |

**1.6 RELEVANT PROPERTY INTEREST**

**If your project relates to a property, please tell us if you own the freehold, leasehold, have a tenancy or other interest. Please tick the relevant box. If leasehold or tenancy you must have an unexpired term of 5 years or more and a letter of support from the landlord for the project.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Leasehold\* |  | Year of expiry | |  | |
| \*Do you lease your property from GBC? | |  | Yes |  | No |
| If yes, have you discussed your grant request with the relevant Council service before making this application? | |  | Yes |  | No |
| Please provide the name of your Council officer contact: | | | | | |
| Tenancy |  | Year of expiry | |  | |
| Freehold |  | | | | |
| Other (please explain) |  | | | | |
| Not applicable |  | | | | |

**2. ABOUT YOUR PROJECT**

**2.1 PROJECT SUMMARY**

**Please provide a name and a short description of your project.**

|  |  |
| --- | --- |
| Project name |  |
| Description of project (in a few sentences) |  |
| Approximately how many people will benefit from the project? |  |

**2.2 DETAILS OF PROJECT FOR WHICH GRANT IS SOUGHT**

**Please explain what your project will do (max 200 words).**

|  |
| --- |
|  |

**2.3 DELIVERING FUND PRIORITIES**

**We want to know if your project will help address one or more of the fund priorities, which are:**

1. **Enhancing community places and spaces**
2. **Bringing people together and building stronger communities**
3. **Improving sustainability and tackling climate change**
4. **Developing people, skills and opportunities**

**In the box below, please outline the wider benefits of your project, specifically including how it will address any of the fund priorities.**

|  |
| --- |
|  |

**2.4 PLEASE PROVIDE THE NAME OF ANY ARCHITECT / OTHER PROFESSIONAL ADVISERS**

|  |  |
| --- | --- |
| Name of architect / adviser |  |
| Address and postcode |  |
| Tel no. and email |  |

**3. COSTS AND FUNDING**

**3.1 WHAT IS THE TOTAL ESTIMATED COST OF YOUR PROJECT?**

|  |  |
| --- | --- |
| Total cost of the project including any non-recoverable VAT | £ |

**3.2 HOW HAVE THE PROJECT COSTS BEEN CALCULATED?**

**Please indicate whether costs are a fixed quote or estimate etc. Please provide quotes for each item or works over £3k (three quotes are advised). For projects that have a high number of small costs (such as events) please provide an estimated breakdown of how the grant would be spent. An itemised summary of actual spend will need to be included as part of the End of Project Report.**

|  |
| --- |
|  |

**3.3 GRANT REQUEST**

**Tell us how much grant you are applying to us for.**

|  |  |
| --- | --- |
| Grant request | £ |
| Grant request as % of project costs | % |

**3.4 MATCH FUNDING**

**Tell us from which source you will be contributing to project costs. Please be advised that applications which can evidence some match funding may be considered more favourably than those requesting 100% of costs.**

|  |  |
| --- | --- |
| Amount of own resources committed to this project | £ |
| Other grants secured for this project | £ |
| Loans | £ |
| In kind | £ |

**3.5 FURTHER DETAILS**

**Please tell us if any of the following situations would apply to your proposal.**

|  |  |
| --- | --- |
| Please confirm if the project would support a statutory activity, and if so, why funding is not available through the usual streams. |  |
| If people benefitting from the project will be required to make any contribution towards the cost, please outline how much and what they will receive. |  |
| Please provide details of any ongoing costs associated with your project and how they would be sustained long-term. |  |
| Please confirm whether your organisation would be willing to allow other groups and individuals to make use of any funded equipment or infrastructure. If so, please advise if a charge would apply. |  |

**4. TIMETABLE AND PROJECT MANAGEMENT**

**4.1 PLEASE TELL US WHEN YOUR PROJECT WILL START AND FINISH.**

**We expect projects to be completed within 2 years of a grant award.**

|  |  |
| --- | --- |
| Estimated project start date |  |
| Estimated project completion date |  |

**4.2 PLEASE TELL US WHO WILL BE RESPONSIBLE FOR MANAGING YOUR PROJECT**

|  |  |
| --- | --- |
| Name of project manager |  |
| Address and postcode |  |
| Tel no. and email |  |

**4.3 CONSENTS**

**Please tell us if your project requires any additional consents.**

|  |  |
| --- | --- |
| Is planning permission or any permits or consents required for your project? If so, at what stage are they? Please provide any planning application reference number you have for your project. |  |

**5. SUPPORTING DOCUMENTS CHECKLIST**

**Please tick to confirm you have attached the following documentation.**

|  |  |
| --- | --- |
| 5.1 Financial reserves. Please give details about the level of free reserves (unrestricted and undesignated funds) held by your organisation - both the total amount and also the amount in terms of number of months running cost:  • Amount in free reserves held \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  • Number of months running costs this equates to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| 5.2 Headed paper showing the community or business bank account you would like the funds to be transferred to |  |
| 5.3 Relevant insurance policies for your organisation and project – e.g. Building Insurance, Public Liability (if applicable) |  |
| 5.4 Relevant ownership documents (if applicable) such as Land Registry ownership documents or lease - If a leasehold, a letter of support from the landlord for the project |  |
| 5.5 Drawings of the proposed works (if applicable) |  |
| 5.6Photographs showing the site and areas where work is required (if applicable) |  |
| 5.7 Quotes/tenders and evidence of how these have been identified |  |
| 5.8 Evidence of any match funding for the project (if applicable) |  |
| 5.9 Details of any required planning permission, permits or consents (if applicable) |  |
| 5.10 Details of how you will look after your project in the longer term |  |

**6. YOUR DECLARATION**

**The completed form must be signed here by the main applicant named at 1.2 above. If the applicant is from two or more individuals, all should sign. If the applicant is a body (organisation), an authorised representative of that body should sign and should name their post in the body.**

***I confirm that the information on this application form and the supporting information enclosed is true and complete to the best of my/our knowledge*.**

|  |  |
| --- | --- |
| Name (s) |  |
| Position held (organisations only) |  |
| **Data notice**  All information will be held in accordance with General Data Protection Regulations (GDPR) and as per GBC’s Data Protection privacy notice, which can be viewed at: [www.gosport.gov.uk/dataprotectionprivacynotice](http://www.gosport.gov.uk/dataprotectionprivacynotice) | |
| **Privacy Statement**  **□** By ticking this box you consent to the data you provided being used for the purposes of processing and administering your application. Your data will be kept in line with the Council’s data protection policy. | |
| Signature (s) |  |
| Date |  |

**Please email completed forms to the Grants Officer at** [**gbcgrants@gosport.gov.uk**](mailto:gbcgrants@gosport.gov.uk) **or post to:**

Grants Officer

Gosport Borough Council

Town Hall, High Street

Gosport, PO12 1EB