

**MINOR GRANTS (up to £1,000)**  
**APPLICATION FORM**

If you require extra space when answering a question, please attach an additional sheet

Name of Organisation			Contact Name	
Correspondence Address				
Town			County	
Postcode				
Telephone number (Daytime)		Telephone number (evening)		
Email Address			Your position	

1. What is the nature of your organisation's activity?

2. What are the aims and objectives of your organisation?

3. When was your organisation formed?

4. Has it operated previously under another name?

YES

NO

5. If so, when did the change take place?

6. Is your organisation a registered charity?

YES

NO

If so, number?

7. Is your organisation part of, or affiliated to, any national organisation?

YES

NO

If yes please give details

8. What is the catchment area covered by your organisation?

9. How many members belong to your organisation?

Burgess Hill Residents

Non Burgess Hill Residents

Adult

Adult

Junior

Junior

10. Briefly describe the project or purpose for which you require a grant

11. How will the project benefit the community or residents of Burgess Hill?

12. How many Burgess Hill residents will benefit from the grant you are requesting?

13. Is your organisation VAT registered?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	VAT number:	
14. When do you intent to start the project?				
Completion date?				

## 15. FINANCIAL ASSESSMENT

### 15.1 Estimated Cost of Project

(Please provide a breakdown of the total cost of your project)

(round pounds)

	£	
	£	
	£	
	£	
	£	
VAT (ignore if your organisation can claim VAT)	£	
<b>Total estimated cost of project</b>	<b>£</b>	

### 15.2 How are you going to fund the project?

a) How much money from your own funds are you going to use?

£

b) How much money for the project do you hope to raise through staging your own events? (if applicable)

£

c) Will you be receiving grants or donations from other organisations towards the cost of the project? If so, what are they:

Funding Body	Applied for / confirmed (please state)	Date funds received / expected	
1			£
2			£
3			£

4				£	
<b>TOTAL FOR SECTION C (Grants &amp; Donations):</b>				<b>£</b>	
<b>d) What is the grant requested from Burgess Hill Town Council?</b>				<b>£</b>	
<b>TOTAL FUNDING OF THE PROJECT (a + b + c + d)</b>				<b>£</b>	
<b>16. SURPLUS / DEFICIT OF PROJECT (15.1 minus 15.2)</b>				<b>£</b>	
If there is a shortfall in raising funds for the project, how do you propose to meet the deficit?					
<b>17. Have you previously received, or applied for, a grant from Burgess Hill Town Council?</b>				<b>YES</b> <input type="checkbox"/>	<b>NO</b> <input type="checkbox"/>
If YES, please give details of amount(s) and year(s)					

18. Please add any further information in support of your application (additional literature, leaflets or recent annual reports may be enclosed with the application):

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19. Who should cheques be made payable to?

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20. How many signatories are required to sign each cheque?

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21. Who are the authorised signatories?

Name		Position	
Name		Position	
Name		Position	

22. Please provide your BACS details for grants payments:

Bank Name and Address:		Sort Code:	
		Account number:	

23. How does your organisation contribute towards the objectives of the Town Council's Environmental Charter (copy enclosed)?

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**Declaration**  
I declare that I have read and accept the Guidance Notes and Conditions of Funding and that I have answered all questions fully and truthfully. I also declare that any grant made will be used solely for the purposes outlined in this application. I understand that Burgess Hill Town Council reserves the right to reclaim the grant in the event of it not being used for the purpose specified.

Full Name	
Signed	
Position	
Date	
Email	

(Please complete this if you are happy to receive confirmation by email on the outcome of your application.)



# MINOR GRANTS

## IMPORTANT

### DOCUMENTS TO SEND WITH YOUR APPLICATION

The following documents **MUST** be submitted with your application:

1. A copy of your organisation's Constitution, **signed and dated** by the Chair.
2. If your organisation works with children or vulnerable adults a copy of your Safeguarding Policy and Procedures must be enclosed.
3. A copy of your organisation's audited or independently examined accounts including balance sheet for the past 2 financial years, and a copy bank statement and bank reconciliation as at the last balance sheet date. If your full year accounts are **older than 12 months** from the date of this application, a signed\* interim set of accounts or management accounts will be required also.

*\* Treasurer or Chairman of the organisation will suffice.*

4. IN THE CASE OF A NEWLY FORMED ORGANISATION, a budget and business plan should be sent including specification of how the project will be managed.

**Please note: the payment of grant by the Town Council is made strictly on the understanding that should the project not go ahead, all monies will be returned to the Town Council.**

When completed, please send this form together with supporting documents to:

Judy Pointing  
Community Development Officer  
Burgess Hill Town Council  
96 Church Walk  
Burgess Hill  
RH15 9AS

☎ 01444 238211  
Email: [judy@burgesshill.gov.uk](mailto:judy@burgesshill.gov.uk)