

MAJOR GRANTS (£1,000 +)
APPLICATION FORM

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?

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<u>Burgess Hill Residents</u>		<u>Non Burgess Hill Residents</u>	
Adult		Adult	
Junior		Junior	
<p>If your organisation is not membership based, please give details of the number of people you work with/provide services for and how many are resident in Burgess Hill</p>			
<p>10. Describe the project or purpose for which you require a grant</p>			
<p>11. If the grant requested relates to a building, does your organisation hold the leasehold or freehold (please specify)</p>			

12. If leasehold, how long is the lease?			
13. Is a mortgage or loan secured on the building?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
14. Is the building insured?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
15. How much is the building insured for?			
16. Are the premises available for hire by the wider community?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	
17. Does the building comply with the requirements of the Disability Discrimination Act? (please specify)			
18. How will the project benefit residents of Burgess Hill?			
19. Is your organisation VAT registered?	YES <input type="checkbox"/>	NO <input type="checkbox"/>	VAT number:
20. When do you intent to start the project?			

Complete the project?

21. FINANCIAL ASSESSMENT

21.1 Estimated Cost of Project

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

(round pounds)

Purchase of land / buildings

£

Purchase of vehicle (make/model)

£

Subcontractor fees (plumbers, electricians etc)

£

Equipment hire (vehicle, generator etc)

£

Materials/tools required

£

Professional fees (designers, surveyors etc)

£

Other (e.g. rent, advertising; please specify)

£

£

£

VAT (ignore if your organisation can reclaim VAT)

£

Total estimated cost of project

£

21.2 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				£	
What is the grant requested from Burgess Hill Town Council?				£	
TOTAL FUNDING OF THE PROJECT (a+b+c+d)				£	
SURPLUS (DEFICIT) OF THE PROJECT (21.1 – 21.2)				£	
22. If there is a shortfall in raising funds for the project, how do you propose to meet the deficit?					
23. Have you previously received, or applied for, a grant from Burgess Hill Town Council?				YES <input type="checkbox"/>	NO 1 <input type="checkbox"/>
If YES, please give details of amount(s) and year(s)					

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

25. Who should cheques be made payable to?

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

27. Who are the authorised signatories?

Name		Position	
Name		Position	
Name		Position	

28. Please provide your BACS details for grants payments:

Bank Name and Address:		Sort Code:	
		Account number:	

29. 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.)

MAJOR 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.
5. A copy of the freehold or leasehold document (where the application relates to a building).
6. A copy of the building insurance certificate (where the application relates to a building).
7. A copy of the booking form and hire charges (where the application relates to a building).

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
Burgess Hill Town Council
96 Church Walk
Burgess Hill
RH15 9AS

Tel: 01444 238211
Email: judy@burgesshill.gov.uk