

# APPLICATION FOR GRANT AID BY A VOLUNTARY ORGANISATION



Unique Registration Number	
Amount applied for	
Amount awarded	

**Please read the criteria booklet before you complete this form.**

## PART 1. ORGANISATION DETAILS

### A) WHO ARE YOU?

- Name of your group: .....
- Name of main contact: ..... Position held: .....
- Postal address of contact person: .....

Phone: .....

Fax: ..... E-mail: .....

Are you a Registered charity?  Unregistered charity?  Parish Council?   
Club?

- What are the main activities of your group? .....

- Where do you meet? .....

- When was your group set up? ..... month ..... year

- How many people are involved in running your group? Please put numbers in the boxes below:

Committee Members (volunteers)	Paid staff (Full time)	Paid staff (Part time)	Volunteers
[ ]	[ ]	[ ]	[ ]

Management Committee Details:

Name	Home Address	Position Held
.....	.....	Chair
.....	.....	Secretary
.....	.....	Treasurer

8. Please supply the following information to enable us to transfer funds from a successful grant award directly to your account.

Bank name.....

Bank sort code.....

Bank account name .....

Bank account number .....

Please enclose copies of your:      a) Constitution      b) Most recent annual Accounts

**PART 2 - ACTIVITY/EVENT/PROJECT/SCHEME DETAILS**

**B) WHAT DO YOU WANT FINANCIAL ASSISTANCE FOR?**

9. What is the event/activity you are seeking funding for? (*Please continue on a separate page if necessary*). We will base our assessment of your application on the information you provide here.

.....  
.....  
.....

10. Who will benefit from the activity? .....

How many people will benefit? .....

Is this activity open to non-members?      Yes      No

11. To which of the Council's strategic objectives does your application contribute? For full details please see attached list of objectives – page 14.

- Green Issues
- Sustainable Developments
- Town Centres

Please indicate how your application supports these objectives.

.....  
.....  
.....  
.....  
.....

12. When and where will the event/activity for which you require financial assistance take place?

.....

13. How and where will your event/activity be publicised? *(For all events, Groups will be asked to submit promotional material).* .....

14. What is the **total cost** of the activity/event you are planning? Please provide a detailed breakdown below?

**Expenditure:**

..... £.....  
..... £.....  
..... £.....  
..... £.....  
..... £.....  
..... £.....  
..... £.....

Total £.....

**Income:**

(Please provide details of planned or expected income for this activity. Also tell us about any other grants you have already received or are applying for, or expected income from fund raising events. We will take this information into consideration).

1. Expected income from event: £.....

2. Other sources of funding: £.....

£.....

Total £.....

What is the total of grant aid you are asking for? £.. .....

## Declaration

### Conditions of Grant

- The Council will not give grants for events/ purchases which have already taken place, or where work on a project has already begun.
- Grant monies awarded may only be spent on the activities described in the application.
- The Council will require details of how the grant was spent, and the provision of receipts, within one month of the completion of the project.
- Any unspent funds must be returned to the Council.
- Details supplied later proved to be incorrect may prejudice a subsequent application.

I declare on behalf of the organisation that:

- The application is supported by the Organisation's Management Committee.
- To the best of my knowledge and belief the information I have given is correct.
- I understand the conditions on which grant funding is awarded and agree to adhere to those conditions.
- I understand that it will normally take up to 8 weeks for a decision to be reached.
- I authorise the Council to make any necessary enquiries to verify the information on this form, and to cross check information I have given with any other sections within the Council or other organisations.
- I understand that additional conditions may be attached to the award of any grant.

Signed ..... Print Name .....

Office Held ..... Date .....

### Important

**Your application can only be processed if all the questions are answered, the form is signed and if we receive all necessary enclosures.** Please use the checklist below to ensure that you are sending us everything that is required to process your application. Please note if all these questions are not answered your application will be returned to you for completion and this will delay the consideration of your application.

- All questions are answered completely (Tick) .....
- The form has been signed by either the Chair, Vice Chair, Treasurer or Secretary of your Management Committee.

### You have enclosed:

- A copy of your constitution, dated and signed as adopted by your group; .. .....
- A copy of the quotation you have accepted, 3 if your projects total cost is over £5,000 net and brief written evidence to show how this quotation gives best value for money .....
- A copy of your most recent annual accounts, dated and signed as approved OR,

### If you are a new group:

- A statement of your estimated income and expenditure for the year. .. .....

If you have ticked all these questions, your application is now complete. Please return to:

**Community Development Team,  
North Hertfordshire District Council Offices,  
Gernon Road, Letchworth, Herts, SG6 3JF.**