

CRANLEIGH PARISH COUNCIL

Council Offices, Village Way, Cranleigh, Surrey, GU6 8AF Tel. 01483 272311 E-mail clerk@cranleigh-pc.gov.uk

Organisation Name

Position in Organisation

Contact Name

APPLICATION FOR GRANT

Please read our Grants and Donations Policy before completing this form.

When the form has been completed, please return to the Clerk at the address above.

APPLICATION DETAILS

| Organisation Address | | |
|------------------------|-----------------|-----------------------------|
| Post Code | | |
| Contact Telephone No | | |
| Registered Charity | YES / NO | |
| | PROJECT DETAILS | |
| Project Name | | |
| Project Location | | |
| Project Start Date | | |
| Project End Date | | |
| Total Cost of Project: | £ | |
| Amount Requested* | £ | Percentage of Project Cost% |
| | | |

| | ed is in excess of £500 kindly ad | lvise |
|--|-----------------------------------|----------|
| The current level of | £ | |
| Reserves held | | |
| | | |
| | | |
| What is the applicants | | |
| policy for use of those | | |
| Reserves? | | |
| [brief outline to be given] | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | PROJECT COSTS | |
| | | |
| Has a grant been paid by th | is Council previously ? | YES / NO |
| | γ , | |
| If YES give details: | | |
| l 120 givo dotailo. | | |
| | | |
| | | |
| Do you have funding from other authorities 2 | | |
| Do you have funding from other authorities? | | |
| If YES give details | | |
| II 1E3 give details | | |
| | | |
| | | |
| | <u> </u> | \/F0 /N0 |
| Have any fundraising activit | ies been arranged? | YES / NO |
| A (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 | 1: 6 | |
| | al information to support the | |
| request: | | |
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| | GRANT DETAILS | |
| | · | |
| What is the Grant required | d for ? | |
| | | |
| Project Aims [one/two | | |
| sentences stating overall | | |
| aim] | | |
| | | |
| | | |
| Project Objectives [| | |
| Project Objectives [| | |
| state three/four key | | |
| objectives] | | |
| | | |
| | | |
| | | |

| Project Description [outline a clear description of the project] | | |
|---|-----------|--|
| | | |
| | <u> </u> | |
| Implementation | | |
| Which Organisation will be responsible for implementation of the project? | | |
| If land/property is involved | | |
| Has permission been obtained ? | | |
| Are there any current contracts or leases which may be affected ? | | |
| Who owns the land? | | |
| Are any other consents req | uired? | |
| | | |
| Timings | | |
| When is the grant required by? | | |
| Timetable [kindly provide a timetable to implement the project] | | |
| Date | Milestone | |
| | | |
| | | |
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| | | |

COMMUNITY PARTNERSHIPS

| How will the project give prompt and tangible benefit the local community? | | | | |
|---|---------|--|--|--|
| | | | | |
| | | | | |
| | | | | |
| Who and how many of the local community will benefit ? | | | | |
| | | | | |
| | | | | |
| How do you know there is a need for this project? | | | | |
| | | | | |
| | | | | |
| | | | | |
| DECLARATION | | | | |
| I hereby certify that the details supplied in this application are correct and the following information is enclosed (as applicable). | | | | |
| A location plan or site plan | YES/NO | | | |
| Copy of organisation's latest audited accounts | YES/ NO | | | |
| Copy of constitution or set of rules | YES/NO | | | |
| Evidence of any permissions or consents | YES/NO | | | |
| Estimates/quotations to support the request | YES/NO | | | |
| (Projects over £1,000 require evidence that three estimates/quotations have been sought. | | | | |
| Projects under £1,000 require evidence of two estimates/quotations | | | | |
| Signed: | Date: | | | |
| Position in Organisation: | | | | |