OLD BASING & LYCHPIT PARISH COUNCIL



APPLICATION FOR GRANT

(ORGANISATION/GROUP ONLY)

The Parish Council regrets it is unable to consider grants or sponsorships for individuals)

PLEASE NOTE: This form MUST be completed IN FULL before the Council can consider any grant application. Applications must also include following documents:

- The Organisation's Constitution
- The most recent **Annual Report**

1. FULL NAME OF APPLICANT

- The last AGM Minutes
- A copy of the most recent published Annual Accounts

	(Charity/Organisation)				
2.	FULL POSTAL & EMAIL ADDRESS OF APPLICANT (Charity/Organisation)	Address (inc. post code):			
		Email:			
3.	Registered Charity No. (if applicable)	4. Telephone No:			
5.	FULL NAME OF NOMINATED CONTACT(S):	6. POSITION/TITLE OF NOMINATED CONTACT:			
7.	ORGANISATION'S AIMS & OBJECTIVES:				
8.	8. Does your organisation work SOLELY for the benefit of residents of OLD BASING & LYCHPIT? Yes / No				
9.	If "Yes", how many OLD BASING & LYCHPI	T residents benefit on a regular basis?			
10	10. If the answer to question 8 is "No", please specify the geographical areas that you provide for and the number of persons that regularly benefit from your Charity or Organisation:				
11.	If your organisation is <u>OUTSIDE</u> OLD BASIN residents do (or will) regularly benefit fror	IG & LYCHPIT, how many OLD BASING & LYCHPIT n the services you provide?			

12. Are you seeking Grant Aid from other sources? (e.g. B&DBC, HCC etc) – please specify:

13.	How many of the following are in your organisation?			
	UNPAID VOLUNTEERS: FULL TIME PAID STAFF: PART-TIME PAID STAFF:			
14.	Have you previously received a grant from Old Basing & Lychpit Parish Council?	es / No		
15.	If "Yes", please enter month, year & amount:			
	DATE when grant awarded: AMOUNT awarded: £			
	PART 2 – <u>ABOUT YOUR GRANT APPLICATION</u>			
16.	What GRANT SUM are you applying for from OLD BASING & LYCHPIT PC? £			
17.	Please provide bank account number and sort code into which the Grant (if agreed) is to be	paid:		
	ACCOUNT NO: SORT CODE:			
18.	Is your organisation registered for VAT? i.e. can you claim input tax/VAT?	s / No		
19.	Please specify what the grant would be used for? (e.g. capital project/running costs/other):	,		
20.	If the grant is towards a PROJECT DEVELOPMENT, do you require formal Planning Consent?	s / No		
21.	. If the grant is to be used for a PROJECT, when do you expect to start & finish?			
	START DATE: FINISH DATE:			
22.	Please give any additional information that you feel is relevant, or will support this applicat fundraising events undertaken by your organisation and amounts raised (other than grants):		
	PLEASE NOTE: If your application is successful, whether in whole or part, it would be condit upon your organisation acknowledging OLD BASING & LYCHPIT PARISH COUNCIL in its Annu Report or in any other publication (newsletter, magazine, etc.) relevant to your organisatio In signing this grant application you agree to be bound by this condition.	ıal		
	Signed: Dated:			

You are welcome to attend the full Parish Council Meeting at which your grant application is discussed (you will be notified of the relevant meeting date)