

NORTHUMBERLAND

Northumberland County Council

Grant Application Form

YOUR GROUP/ORGANISATION DETAILS

FINANCIAL YEAR: 2009/2010

1. Name of person(s) making application	2. Name of Group/Organisation
3. Position Held in Group/Organisation:	
Address	Address
Tel:	Tel:
E-mail:	Web:
4. Please give a brief description of your group/organisation	
5. What is the status of your group/organisation?	
Registered Charity <input type="checkbox"/>	Voluntary Organisation <input type="checkbox"/>
Community Group <input type="checkbox"/>	Tenants Association <input type="checkbox"/>
Company <input type="checkbox"/>	Other, please specify <input type="checkbox"/>
If Charity, please give Charity Number	
6. Does your Group/Organisation have a Constitution or Memorandum of Articles of Association?	
YES <input type="checkbox"/>	NO <input type="checkbox"/> If YES, please enclose a copy
7. Does your Group/Organisation have a bank account? YES <input type="checkbox"/> NO <input type="checkbox"/>	
Please Note: a grant will only be payable into a Bank Account of the same name as the organisation making the grant application. If you do not have a bank account this will need to be set up prior to a grant being offered or any payment being made.	

PROJECT DETAILS

8. Please provide a full description of the proposed project (please continue on additional sheet if required)

What is the project?

How was the need for this project identified? (e.g. Community Forum, Parish Council Meeting, Survey)

Location of project

Who will benefit from the project

If appropriate, please quantify impact of project (e.g. number of people benefiting)

When will the project be delivered?

What other organisations/partners will be involved in the project?

8a. Please tick the appropriate box(es) below to demonstrate how this project supports the Council's strategic priorities and fits with Northumberland's Sustainable Community Strategy.

This project will assist Northumberland Residents to:

- | | | | |
|-------------------------------------|--------------------------|-------------------------------------|--------------------------|
| Enjoy a good standard of living | <input type="checkbox"/> | Take part in cultural activity | <input type="checkbox"/> |
| Live safely and in comfort | <input type="checkbox"/> | Care about our environment | <input type="checkbox"/> |
| Lead healthier lifestyles | <input type="checkbox"/> | Get involved and bring about change | <input type="checkbox"/> |
| Readily access the things they need | <input type="checkbox"/> | | |

Will the project assist any of the following target communities:

- | | | | |
|-----------------------------|--------------------------|--------------------------------------|--------------------------|
| Children and Young People | <input type="checkbox"/> | Older People | <input type="checkbox"/> |
| People on no or low incomes | <input type="checkbox"/> | People who are discriminated against | <input type="checkbox"/> |

9. We need to ensure that you have checked any permissions required for your project.

- | | | | | |
|---|-----|--------------------------|----|--------------------------|
| Do you require planning permission? | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| Do you require an event or premises licence? | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |
| Do you require any guidance regarding environmental Issues? | YES | <input type="checkbox"/> | NO | <input type="checkbox"/> |

If appropriate, do you lease or own the site? Please give details _____

GRANT DETAILS

10. Please set out the estimated cost of the project

Item of expenditure	Cost £
Total Cost	

11. How have the above costs been estimated?

12. Will this grant cover all costs of the project? Yes No

If No, how do you intend to fund your project? Have you been able to secure funding from other sources? Please give details of all funding either secured or applied for

Source of Funding	Current Status (secured or pending)	Total £
Northumberland County Council	Pending	
Own contribution		
In kind contribution		
Other grants (please specify)		
Total		

13. Once the project is delivered, will there be any ongoing costs or activity needed? If so, how will this be achieved?

14. Please provide any other information that you feel is relevant to this grant application.

SIGNATURE: _____ NAME (Please print) _____

DATE: _____

Please return form to: Susi Goncu
Locality Development Team
Policy and Partnerships
Northumberland County Council
County Hall
Morpeth
NE61 2EF

Please note: No expenditure should be incurred before confirmation of grant allocation. Retrospective applications will not be considered.