

Office use only

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Reference no

Officer



WINCANTON TOWN CENTRE REGENERATION EVENTS AND ACTIVITY GRANT APPLICATION FORM

Please complete and return to
future@wincantontowncouncil.gov.uk

Name of Project:			
Section 1 – Your Details			
Name of Organisation/Business			
Contact name			
Position			
Contact address			
Post code			
Contact telephone number			
Email address			
Website (if applicable)			
Are you the sole applicant or is this part of a collaboration with other organisations/ businesses?			
If you are working with other businesses/organisations please list these below and confirm that they are aware that they have been identified within this application			Are they aware they are named in this application ?
			Yes No
			Yes No
			Yes No
			Yes No
			Yes No
If you are a Community Group or Social Enterprise please indicate the legal structure of your group.			
Charity or Company registration number			

How many people are involved in running the event/project?					
Volunteers		Paid Staff		Committee members	
Other (please give details)					
Do you hold a safeguarding policy – this is for projects involving young or vulnerable people			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Do you have an Equalities and Diversity Policy?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
How are people able to find out about and participate in your group's activities?					
List some of your achievements from the last twelve months					
For this event/project do you have:					
Do you have Public Liability insurance?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Do you have Employer Liability insurance?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Do you have buildings/property insurance?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	N/A <input type="checkbox"/>
Does your group have its own bank account?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Please supply bank account name for lead body					
Are you VAT registered?			Yes <input type="checkbox"/>	No <input type="checkbox"/>	
Are you, or a member of your committee a SSDC Councillor, a SSDC employee or related to any Councillor or employee of SSDC?					
Yes <input type="checkbox"/> No <input type="checkbox"/>		If yes , please give details			

Section 2 – About your project

Please tell us about your project and what you hope to achieve. Tell us how you have ensured your event is suitable for Wincanton, what risks are involved and how you plan to mitigate them. Please refer to the Regeneration Board's priorities of Deliverability, Innovation, Sustainability, and Value for money. *(If you are developing or expanding an existing project, please be clear about the difference between what you are doing at the moment and what you plan to do)*

Who will be involved in the running of the project?

How will the project benefit the town centre? We are interested in increased footfall, benefits to local businesses and community involvement.

How will you promote your event during its development and on an ongoing basis?

How many people do you expect the event to attract? How will you measure this?

How will you measure the success of the event?		
Has your project been presented to Wincanton For the Future 'Stakeholder Group'? If yes, please summarise feedback received:		
When will your project take place?	Start:	Finish:
Is this once off or regular/annual event?		
<p>When applications are assessed, innovative projects which require initial funding but are aiming to be financially viable in the longer term are more likely to be supported.</p> <p>For annual events or ongoing projects please say how you will continue to fund your project? (this should also be reflected in the budget section)</p>		

Have you applied for:	Yes/No	Comment
Temporary Event Notice		
Road Closure licence		
Other (please state)		

Section 3 - Funding

	<p>Project costs - please provide a full breakdown of your project costs. <i>(If the project/event is an ongoing/annual event this funding application should cover the three-year period)</i></p>		
Item or activity	Year 1 Cost	Year 2 Cost	Year 3 Cost
Total Project Costs			

Projected income	Year 1	Year 2	Year 3
Amount being applied for in this application:			
Partnership funding/ value of 'in-kind' support – please identify the source and amounts of any partnership contributions:			
Please describe non-financial 'in-kind' support e.g. volunteer time			

About the grant and the funding levels

Grants are only available for events/activities which could not happen without funding support. Applications will not be considered for events/projects which have already taken place.

£5,000 maximum for 1-3 year project (single application).

£10,000 maximum for 1-3 year project for collaborative initiatives, where one organisation is the applying body, co-ordinating on behalf of at least three partner groups/business.

If approved the grant payment is usually made once the project has completed (exceptionally, upfront/staged payments may be considered).

Please indicate if a staged payment is likely to be needed and explain in the space below, the preference for releasing this:

Section 4 – Declaration

The information you have provided will be used by SSDC to enable us to contact you and help us assess and process your application. Your information will be held securely within SSDC and only passed to the Project and Development Coordinator at Wincanton Town Council and others within SSDC for the purposes of assessing this grant application. Information will be destroyed in line with the Council's Information Retention Policy.

I declare that, to the best of my knowledge and belief, all the information in this application form is true and complete.

Signature _____ Date _____

Print Name _____

Position held in group _____

If you are emailing this form please fill in the details above and select/tick in the box to agree the above declaration

If you are happy to be contacted with occasional information/updates about Wincanton Regeneration please tick the box below

Please ensure that ALL relevant information and the checklist are returned with your application (see Section 5).

Section 5 - Checklist for applications

Where available, please supply the relevant documentation below. Further / other information may be required to support your application on request.

Where available, the following information should be provided:	Enclosed	To follow	Not applicable	Already supplied	Office Use
Constitution or set of rules	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A copy of the group's most recent set of accounts, bank statement or balance sheet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
A list of your principal officers (ie, chairman, secretary, treasurer)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Equalities statement	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Safeguarding policy	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Where possible, estimates/quotes should be provided in support of your application. For projects under £5,000 - 1 estimate. Projects over £5,000 - 3 estimates. All quotes/estimates must identify VAT if applicable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	