

# Broadstairs & St Peter's Town Council

## APPLICATION FORM FOR FUNDING FOR GROUPS AND ORGANISATIONS

## PLEASE READ THESE NOTES BEFORE COMPLETING THIS FORM

- a) Please complete the form carefully in readable CAPITALS in black ink, or typed. The application needs to contain ALL the information requested and is required to be completed and returned by the due date with all documentation. The grant-making timetable and criteria is on the Town Council's website at <u>www.broadstairs.gov.uk</u>.
- b) Please enclose an up-to-date copy of the Constitution/Rules of your organisation.
- c) Please enclose a copy of the latest audited accounts for your organisation. Please be accurate about your budget and finances. If your funding application is approved we may ask for evidence of quotes to back up your budget statement.
- d) Public sector funds are limited so we are seeking a clear account of how you meet the Council's priorities in putting on your event. Please ensure that you consider your answers carefully as the Panel of Councillors will have a scoring sheet and be assessing your application in accordance to the Grant Criteria as set out on our website.
- e) If appropriate, the Council may require that a member of the organisation attend a meeting of the appropriate Committee to justify the request.
- f) If appropriate, the Council may require that a Member of the Town Council be appointed to the organisation requesting financial assistance.
- g) Should your organisation be successful in its grant application, the Town Council requires that you acknowledge its financial assistance in any publicity or publications by the use of the Town Council Logo, with text below.
- h) Any financial assistance is given on the understanding that your organisation complies with current legislation on Equalities and Diversity and Unlawful Discrimination.
- i) Please be aware that you will need to complete a grant monitoring and evaluation form once your event or project is finished or complete. See grant criteria for further information.

## Your Details

#### Name of Organisation:

#### Grant amount requested:

FOR OFFICE USE ONLY	
Date form received	
Accounts Enclosed	
Copy of Constitution	
Grant Approved / Declined	

1. Contact Name	
2. Position	
3. Address	
	Postcode
4. Telephone	
5. email	
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6. Website	
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7 Nove 9 address	
7. Name & address Of TREASURER	

# APPLICATION FORM for a GRANT TO SUPPORT A GROUP OR ORGANISATION

8. If your organisation has a management committee, how is it appointed? If not, how is your organisation managed? Does your group/organisation have constitutional rules?

9. What are the aims / objectives of your organisation?

## 10. How does your organisation benefit the local community of Broadstairs & St. Peter's?



## 11. Approximately how many people benefit from the activities of your organisation?

Members:	Non-members:	Broadstairs & St. Peter's Residents:	Visitors:	
Approximate overall TOTAL:				

#### 12. Amount of grant being requested An amount must be stated

13. For what purpose will the grant be used? Please be specific.

14. How will this grant benefit the local community of Broadstairs & St. Peter's? Please be specific.

# 15. Has your organisation previously received a grant from the Town Council? YES / NO If YES, how much during the past financial year and when ?

£	Date(s)

#### 16. How was this money spent?

# Managing your Event or Project

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17. Is anyone else financially contributing to your event? If y	ves, please give the details below:
(a) Funding secured: Name of funder:	Amount secured:
(b) Funding applied for:	
Name of funder:	Amount requested:
(c) Funding being used from Reserves or Fundraising:	Amount
Details	

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18. If this would be your only source of funding, please explain why?

19. If this is a recurring event and you have received funding from the Town Council before, have you sought alternative funding from another funder? If not, why?

20.	Is your organisation	VAT registered? I	If so, please supply	your VAT number:
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21. Do you have public liability insurance of not less than £5million to cover the event? If yes, please provide a copy with this application. If no then please outline below when you intend to secure it.

22. Do you employ anyone to help with your event? If yes, how many people do you employ?

23. Do you have any volunteers assisting your event? If yes, how many volunteers do you have?

24. Please give a brief outline of the skills, experience and/or training that your employees or volunteers have in managing or working on an event.

25. Is your event affiliated to any national or local support organisation? If yes, please provide full details:

## FINANCIAL STATEMENT

Please **complete the whole statement – both columns Current year and Next year**, giving as much detail as space will allow. *The form will be returned for completion if you fail to give enough information, which may delay your application.* 

You should also enclose the most recent set of audited accounts. (See checklist on front page)

INCOME	Current Year Actual or Estimated (state which)	Next Year Estimate	EXPENDITURE	Current Year Actual or Estimated (state which)	Next Year Estimate
SUBSCRIPTIONS			STAFF COSTS		
GRANTS Please specify:			VOLUNTEER EXPENSES		
SPONSORSHIP or DONATIONS			PREMISES		
Please specify:			Rent		
			Rates		
			Services		
			Maintenance		
FUND-RAISING: Please specify:			OFFICE EXPENSES		
Ticade opeony.			Telephone/Fax		
			Printing/Stationery		
			Postage		
FEES & CHARGES			ADVERTISING		
Please specify:					
			INSURANCE		
			VENUE HIRE		
OTHER Specify:					
			EQUIPMENT		
			Purchase		
			Hire		
			OTHER Specify:		
TOTAL: £			TOTAL: £		

#### **BANK BALANCES:**

Balance at bank at the beginning of last financial year	£	BALANCE
+ Add Income during the year	£	£
<ul> <li>Less Expenditure during the year</li> </ul>	£	£
Balance at the beginning of this financial year	CARRIED FWD	£
Reserves / Savings	£	

# Your Declaration

#### Please complete the section below as the final part of your application. Failure to complete this declaration could result in a delay to your application.

Have you read and do you agree to comply with the Broadstairs and St. Peter's Town Council Criteria for the Awarding of Grants?				
Yes: No:				
Are you an employee of the Town Council or Thanet Dist employee or a Councillor at the Town Council or Thanet	rict Council? Are you related to an District Council?			
I am an Employee: Please record your job title, departm	ent and line-manager.			
My relative is: Please provide their name, your relationship to them, and the role/job that				
they play at the Council.				
I certify that the information given on this form is correct and understand that the form will provide the basis on which the grant application is considered. I enclose an up-to-date copy				
of the constitution or rules of the organisation and the latest audited accounts.				
SIGNED:	DATE:			

## Please return the completed form – together with all appropriate attachments:

The Town Clerk Broadstairs & St. Peter's Town Council Pierremont Hall Broadstairs CT10 1JX

town.clerk@broadstairs.gov.uk