

REF No _____

Carmarthenshire Welsh Church Fund Application for Funding

- This application is to be completed in conjunction with the criteria guidance document.
- Applications must include all supporting documentation related to the project and will not be accepted should any necessary evidence or documentation be absent.
- The degree of support to be offered will be at the discretion of Carmarthenshire County Council.

Organisation Name		
Two Contact Names & Addresses		
Telephone No		
Email		
Project Title		
Project Address (if different from above)		
Ward		

1A. Please provide the Status of your organisation? (If you are a Charity please provide your reference number)

Name of Organisation's Financial Account		
Sort Code		
Account Number		
How many authorised people have to sign to pay money out of this account?		
Name(s) & Position	1	
	2	
	3	
Can your organisation reclaim VAT?	Yes <input type="checkbox"/> No <input type="checkbox"/>	VAT Reference No:

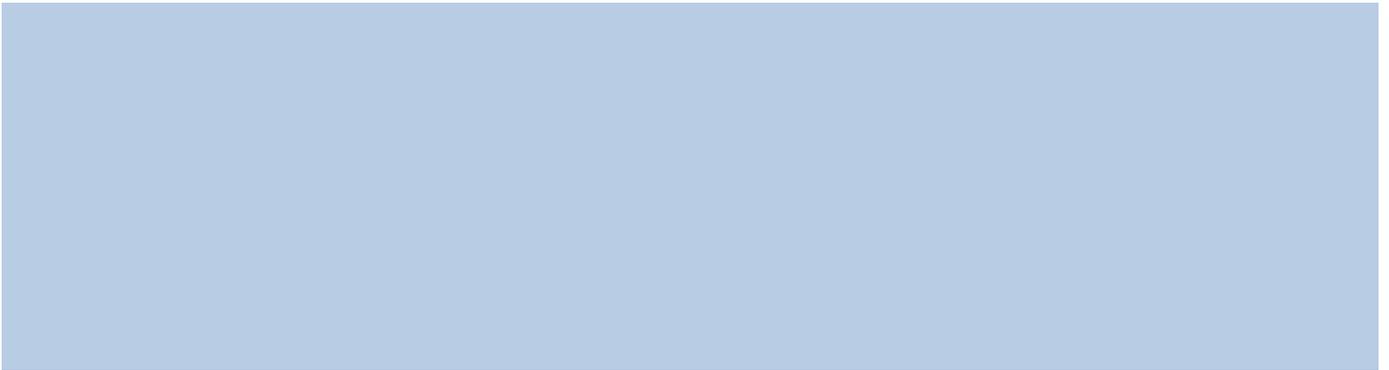
1B. What is your project idea and what will the grant be used for?



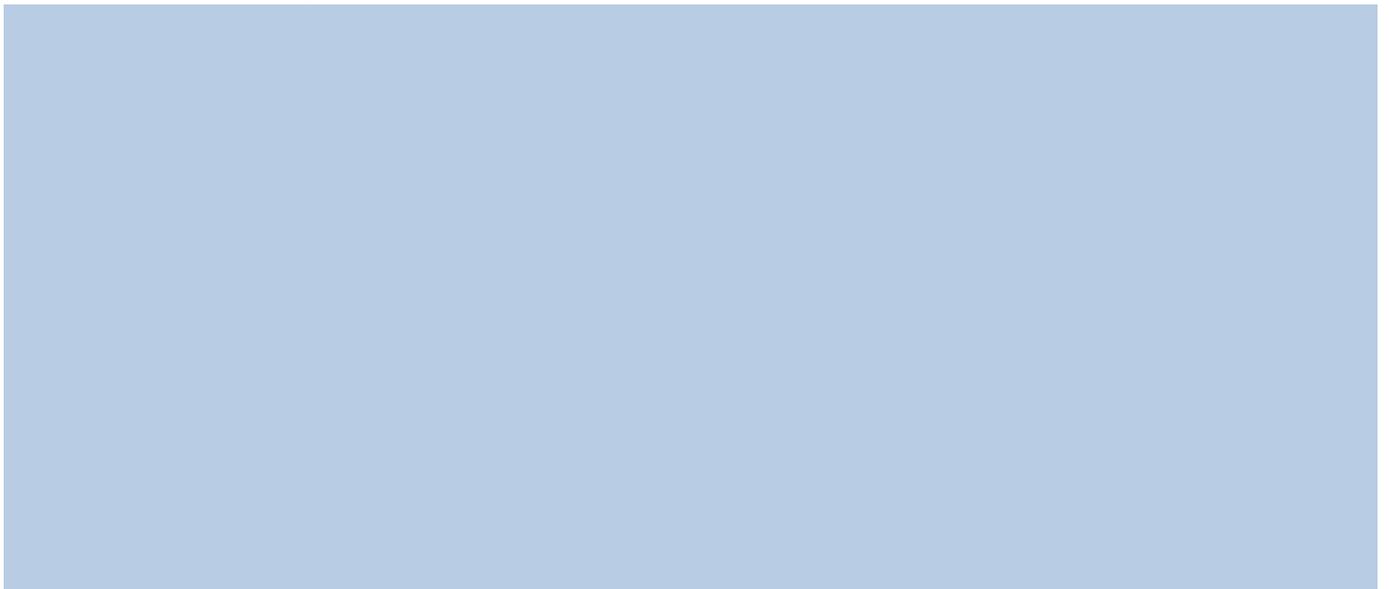
2A. Please indicate which of the following themes your project addresses:

- | | | | | | |
|------------|--------------------------|-------------------|--------------------------|---------|--------------------------|
| Recreation | <input type="checkbox"/> | Education | <input type="checkbox"/> | Health | <input type="checkbox"/> |
| Community | <input type="checkbox"/> | Relief of poverty | <input type="checkbox"/> | Culture | <input type="checkbox"/> |
| Benefit | | | | | |

2B. Tell us how your project contributes to the Welsh Church Fund



2C. What Community Benefit will your project deliver.



2D. What is your Evidence of Need for your project and who have you consulted with?

3. Financial – Project Costs

Please provide details of your total project cost:

Capital Items	Net	VAT	Gross
			£
			£
			£
			£
			£
			£
			£
			£
Capital Total			£
Revenue Items	Net	VAT	Gross
			£
			£
			£
			£
			£
			£
			£
Revenue Total			£
		Total (A)	£

4A. Match Funding

How much match funding are you able to contribute? If applied for other grants, please state the source? All match funding must be cash match funding, in kind will not be considered.

Source	Status (e.g. secured / applied for)	Total
		£
		£
		£
		£
		£
		£
	Total (B)	£

4B. Funding Package (A – B = C)

A: Total project cost	B: Match funding	C: Grant amount requested
£	£	£

4C. Resources of the Organisation

Please also provide annual accounts and /or projected cash flow amounts

Assets	£
Annual Income	£
Annual Expenditure	£

4D. Grant Aid

Please list all non CCC grant aid you have received in the last 3 years.

Year	Funding Body	Amount Awarded
		£
		£
		£
		£
		£

4E. How many CCC grants is the project/activity receiving and please list the Departments the funding has come from?

Year	Department	Amount Awarded
		£
		£
		£
		£
		£

5A. Future Sustainability

Who will be responsible for future maintenance and liability of your project, please tell us how your project will be financially sustainable in the future?



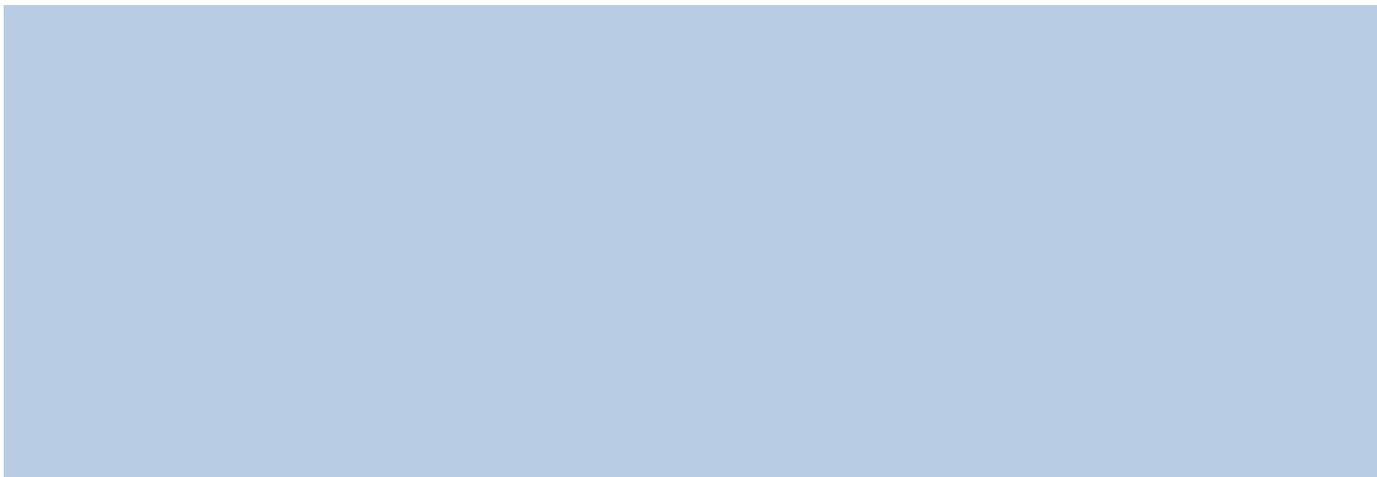
5B. What are the intended roles and responsibility of individuals in your organisations to manage and deliver the project?



5C. Outputs

Number of new volunteers	
Number of jobs created	
Number of jobs safeguarded	
Number of new services available	
Number of physical improvements	
Number of environmental improvement schemes	
Number of new community assets	

5D. How will you monitor, evaluate and evidence the project outputs and the effects of your project in the community?



5E. How will you effectively market and promote your project and the financial support you may receive?

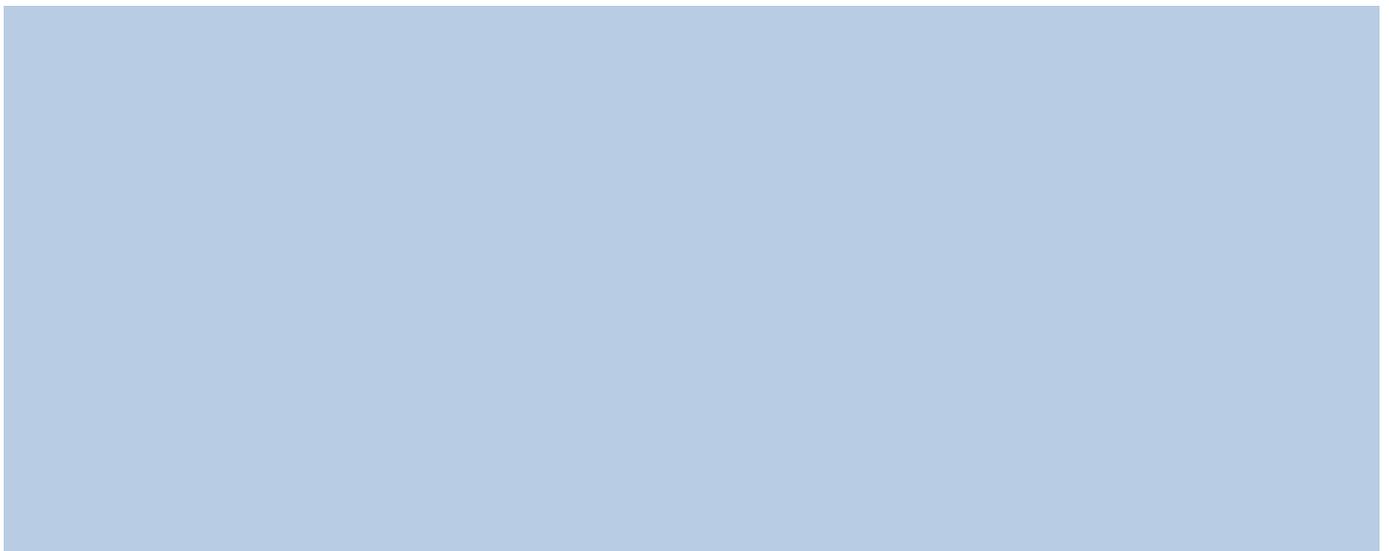


5F. If your application is for a capital project please provide proof of Land Ownership or Lease Agreement

Lease agreement	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Ownership	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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We are aware that, for properties constructed or improved as part of a scheme administered by Carmarthenshire County Council, the authority will seek to register an interest in the grant-aided property with the Land Registry by either a Restriction or a Legal Charge. Yes

5G. Is there any further information that would be useful for the assessment panel to consider?



The information in this application form will be held by the Authority in its records. Information given will also be used by officers of the Authority for monitoring, review and analysis of its Grant Schemes.

Application Checklist and Supporting Documentation

Copy of Governance Document (e.g. constitution)	<input type="checkbox"/>
Accounts and/or Projected Cash-Flow Forecast/Bank Statements	<input type="checkbox"/>
Equal Opportunity Policy	<input type="checkbox"/>
Environmental Policy / Statement	<input type="checkbox"/>
Welsh Language Policy	<input type="checkbox"/>
Insurance Certificates, schedule of covers incl. Public Liability	<input type="checkbox"/>
Evidence of Need Information	<input type="checkbox"/>
Support letters	<input type="checkbox"/>
ICT Policy/Digital Inclusion	<input type="checkbox"/>
Business Plan	<input type="checkbox"/> <input type="checkbox"/>
Quotations for Work	<input type="checkbox"/> <input type="checkbox"/>
Proof of Ownership	<input type="checkbox"/> <input type="checkbox"/>
Signed Lease Agreements	<input type="checkbox"/> <input type="checkbox"/>
Landlord Consents	<input type="checkbox"/> <input type="checkbox"/>
Maintenance Agreements	<input type="checkbox"/> <input type="checkbox"/>
Licences	<input type="checkbox"/> <input type="checkbox"/>
Listed Building Consent	<input type="checkbox"/> <input type="checkbox"/>
Planning permission	<input type="checkbox"/> <input type="checkbox"/>
Environmental Consent	<input type="checkbox"/> <input type="checkbox"/>
Conservation Consent	<input type="checkbox"/> <input type="checkbox"/>
Highways Consent	<input type="checkbox"/> <input type="checkbox"/>
Building Regulations	<input type="checkbox"/> <input type="checkbox"/>
Child Protection Policy	<input type="checkbox"/> <input type="checkbox"/>
Protection of Vulnerable Adults Policy	<input type="checkbox"/> <input type="checkbox"/>
Other (Please List)	<input type="checkbox"/> <input type="checkbox"/>

Declaration

I declare that the information given on this form is accurate and true.

Please provide 2 signatures on behalf of group

	Signatory 1	Signatory 2
Signature		
Print Name:		
Position within the Group:		
Date:		

Please return to:

**Carmarthenshire Welsh Church Fund
Bureau
Carmarthenshire County Council
County Hall
Carmarthen
Carmarthenshire
SA31 1JP
E-mail: Bureau@carmarthenshire.gov.uk
Tel: 01269 590216**

Carmarthenshire County Council (the Bureau) collects personal data about you using this form so that we can deal with your application. To find out more about how we use your information, please contact Data Protection Officer, Carmarthenshire County Council, County Hall, Carmarthen, SA31 1JP. Email: dataprotection@carmarthenshire.gov.uk

Tel: 01267 224127 to obtain our Privacy Notice, or visit our website www.carmarthenshire.gov.wales

'Mae croeso i chi gysylltu gyda'r cyngor trwy gyfrwng y Gymraeg neu'r Saesneg.
You are welcome to contact the council through the medium of Welsh or English'