



Folkestone Town Council



Town Grant Application Form (Applications for £1,000 to £2,500)

A: APPLICATION SUMMARY

Organisation Name:	
Title of Project:	

Contact name <i>(Inc. title)</i>	
Position in organisation / group:	
Correspondence Address:	
Postcode:	
Email address:	
Daytime telephone number:	

Reason for application . brief project/event description:	
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How much is requested from Folkestone Town Council?	£
Title of Project:	£

Declaration: I hereby declare that all information provided is true and accurate to the best of my knowledge. I agree to complete and return any forms relating to this application which are sent to me in the future:

Name:	Position in the organisation:
Signature: (or print name if returning by email)	Date:

DATA PROTECTION STATEMENT

Your details will be kept securely by Folkestone Town Council under the terms of the Data Protection Act and Freedom of Information Act 2000

FTC must protect public funds and may use personal information and data-matching techniques to detect and prevent fraud, and ensure public money is targeted and spent in the most appropriate and cost-effective way. In order to achieve this, information may be shared with other bodies responsible for auditing or administering public funds including the Audit Commission, the Department for Work and Pensions, other local authorities, HM Revenue and Customs, and the Police. We might use personal information provided by you in order to conduct appropriate identity checks. If you provide false or inaccurate information in your application or at any point in the life of any funding we award you and fraud is identified, we will actively seek recovery of the awarded grant funding, and will provide details to fraud prevention agencies, to prevent fraud and money laundering.

The information provided on this application will be held on a database and used to provide information to officers and members of the Town Council.

Organisations are asked to agree to allow its details to be used in the Town Council's website, publications and other materials. Do you agree for your organisation's details to be included? (Please note that personal and financial details will not be published.)

Please select as applicable

Yes No

B: THE ORGANISATION

Name and address of Chairperson or Secretary (if applicable)

Contact name <i>(Inc. title)</i>	
Position in organisation / group:	
Correspondence Address:	
Postcode:	
Email address:	
Daytime telephone number:	

What is the main purpose of your organisation?	
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What type of organisation / group are you?					
Please select the options below that best describe your organisation / group:					
Registered Charity	<input type="checkbox"/>	Community/Voluntary organisation	<input type="checkbox"/>	Sports organisation	<input type="checkbox"/>
Church / Faith group	<input type="checkbox"/>	Not for Profit Company	<input type="checkbox"/>	Parish / Town / District council	<input type="checkbox"/>
KCC Service	<input type="checkbox"/>	School/College/ Pre-school	<input type="checkbox"/>	Youth organisation	<input type="checkbox"/>
Other, please specify:					

If your organisation is a club with membership, please provide the following details:					
Number of adult members		Number of junior members			
Number of members resident in the Town of Folkestone					
Number of adult members		Number of junior members			
Does your club charge for membership?	Yes		<input type="checkbox"/>	No	
If yes, please supply details of the membership scheme and charges applicable:					
What activities are available for members?					
Is the club membership restricted in anyway?					
Is your club /body affiliated to any national or local organisation e.g. Sports Council? If yes, please provide details:					

Please complete parts C to E if all or part of your application is for a special project or event.

C: THE PROJECT/EVENT

Title of Project:	
Description of project/event:	
What are the aims of your project/event?	

If the application is for an annual or recurring local event, please answer the following additional questions:			
For how many years has the event run?			
What was the estimated attendance at the last event and what is the anticipated attendance at the planned event?			
Attendance at the last event:		Anticipated attendance at planned event:	
What was achieved at the last event, which you consider to have been of benefit to the Town?			

D: PROJECT EVENT/PLANNING

Date of proposed event:		What is the proposed duration of the project event ?	
If the project is land or property related, what is the nature of the interest to be acquired or already held? (if leasehold, please give the length of the lease and date of termination)			
Is planning consent required?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes what is the status of your application? Planning reference number			
Not yet submitted: <input type="checkbox"/>	Submitted not determined: <input type="checkbox"/>	Granted <input type="checkbox"/>	
Has planning consent been granted?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please provide details:			
Is your building listed?		Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes have you received the appropriate building consent?		Yes <input type="checkbox"/>	No <input type="checkbox"/>

Is your organisation registered for VAT?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Does the estimated cost of the project include payments in kind? E.g free labour, materials etc. If yes, please provide details below i.e. number of hours x hourly rates.					
In the past three years has your organisation/group received previous grants, Town or Ward, from Folkestone Town Council. If yes, please complete the form below		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Project Name	Type (Ward or Town)	Amount £		Date Received	
Will the organisation be seeking regular help with this project/event from the Town Council?		Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
If yes, please explain and state how much you think you will need next year and the year after:					

F: SUPPORTING STATEMENT

(All applicants to complete – please continue on a separate sheet if necessary)

Why do you think the Town Council should support this application? Please note that you are required to demonstrate a benefit to some or all of the town's residents.

G: ADDITIONAL INFORMATION

Have you enclosed a copy of your latest audited or independently examined accounts?	Yes	<input type="checkbox"/>	N/A	<input type="checkbox"/>		
If you have ticked Not Applicable, please explain why. Failure to enclose copies of accounts may cause you application to be delayed or rejected:						
Have you enclosed a copy of your last bank/building society/other investment accounts statements?	Yes	<input type="checkbox"/>	N/A	<input type="checkbox"/>		
If you have ticked Not Applicable, please explain why. Failure to enclose copies of statements may cause you application to be delayed or rejected:						
Have you enclosed a copy of conveyance/letting agreement/lease?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Have you enclosed a copy of written permission from the owner of any premises involved?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Have you enclosed copies of cover notes/summaries for all relevant insurances?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Have you enclosed evidence of any other secured funding or application for any other funding?	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	<input type="checkbox"/>
Please confirm that statutory obligations under the Human Rights Act have been considered. See the following website for the latest information: www.gov.uk					Yes	<input type="checkbox"/>
Please confirm that statutory obligations under the Disability Discrimination Act have been considered. See the following website for the latest information: www.gov.uk					Yes	<input type="checkbox"/>
Please confirm that you have considered all health and safety issues for this project/event and carried out risk assessments for all relevant areas. See the following website for the latest information: www.hse.gov.uk		Yes	<input type="checkbox"/>	N/A	<input type="checkbox"/>	
Please confirm that you have considered the environmental effects of this project (e.g. carbon emissions, waste, etc.) and give brief details. See the following website for the latest information www.gov.uk		Yes	<input type="checkbox"/>	N/A	<input type="checkbox"/>	

The Town Council has an obligation under s17 of the Crime and Disorder Act to consider the impact of all its functions, activities and decisions on crime and disorder in its area. What implications will your project have for this requirement and how in particular will it assist the Town Council to meet its obligation? See the following website for the latest information: www.gov.uk
Grants are normally given conditionally on the organisations public acknowledgement of the Town Councils assistance. How do you intend to do this? (Please note that you may be required to provide copies of relevant publicity materials.)

Please note that the Town Council will take account of Best Value, its obligation to promote racial equality, its statutory powers and accounting requirements in reaching its decision. The following information (where applicable) is therefore required from all applicants for financial assistance (*before the application can be placed before the Grants Committee*). Information may be provided on a separate sheet if necessary.

Any award will be paid by BACS. Please enter you bank details below:

Name of applicant:						Name of account holder:					
Signature: (or print name if returning by email)						Date:					
Sort Code:						Account number:					

Please return your completed form to:

Liz Timmins, Marketing & Communications Officer, Folkestone Town Council, The Town Hall, 1-2 Guildhall Street, Folkestone, CT20 1DY

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