



Cromer Town Council Grant Application Form

What grant are you applying for Firework grant Town Council grant

Name of Organisation	
Type of Organisation	
Local or national organisation	
Charity or CASC number	

What is the main purpose / Function of your organisation
How is the organisation managed (e.g. Board of Trustees, Committee or other?)
How many members or volunteers are involved in the organisation?

Contact Details:

Name	
Position	
Postal Address	
Post Code	
Email Address	
Telephone	
Website	

Name of Project	
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Total cost of project	£	Amount applied for	£	Percentage of grant	%
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Provide a short summary of the project

Why is the project needed, how do you know?

Explain how your project will benefit the residents of Cromer

Rationale for grant request

a) Explain why grant funding is required to enable your project to proceed

b) Explain what options you have considered for grant funding

c) Explain what will happen to the project if grant funding is not offered

What is the total cost of the project? Please provide a budget breakdown of the total project costs and specific expenditure that the grant would fund

Expenditure	Amount
Total Expenditure	

Other Funding

Source of Funding	Details of the project funded or applied for	Amount of funding (£)	Date of funding award or expected decision	End date of project (if applicable)

Where will any shortfall come from

How many people do you expect to benefit from the project	
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Please give details

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In what way will the project

a) Increase opportunities for people to get involved in or feel more a part of their community

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b) Increase volunteer numbers / create employment opportunities

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c) Pay employees or sub-contractors the Living wage

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Environmental, equality and diversity impacts

a) Explain how you have considered the environmental impacts associated with the project:

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Cromer Town Council wants to ensure that the projects it supports do not unfairly disadvantage anybody in terms of ethnicity, disability, age, gender, religious beliefs, marital status, gender reassignment and sexual orientation. Explain how you have considered any equality and diversity impacts associated with the project:

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How will you publicise and promote the project?

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How would you acknowledge the award from Cromer Town Council if successful?

Display a plaque	
Display Logo on any publicity/ correspondence material	
Other	

Please specify

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Bank Account Details

The organisation's account must have signatures from two unrelated people for all transactions

Name of Organisation

Name of Bank / Building Society Account

Address of Bank / Building Society

Sort Code	
Account Number	

Checklist

Who Can Apply	Yes/No
Properly constituted, not for profit organisation	
Carry out activities otherwise than for profit	
Activities will benefit the community of Cromer Town	

Grant Conditions	Yes/No
Grant will be spent within 12 months, for the purpose for which they were given	
The Grant will not cover any money already spent	
A short report will be submitted outlining the use made of the grant within 6 months of the project's completion	
The grant will not be used for any political activities, commercial ventures or projects for private gain	
A copy of the previous year's accounts is included with the application.	
A copy of the organisations constitution is included with the application	
Copies of any quotations for work is included with the application.	
All staff or sub-contractors are paid as a minimum the living wage	
The organisation does not already receive money from the council's mainstream budget.	

- Organisations are not restricted to the number of grant application submitted to the Council for grant-aid over a period of time, however the history of previous applications will be taken into account in the decision making process.
- The giving of a grant one year does not set a precedent for another year.
- The Council will only in exceptional circumstances award grants to an organisation which itself awards grants to others.
- The Council does not normally give grants to regional or national charities unless a direct benefit to Cromer Town can be shown.
- The Council would normally expect to project for which the grant assistance is being sought to be partly funded by the applicant body from its own resources or from its fund raising activities.

Declaration

Please ensure that you have answered all the questions on the application form and attached all supporting documentation required on the checklist otherwise your application cannot be considered.

- I as the main contact named on this application form am authorised to apply for a grant from Cromer Town Council on behalf of the organisation.
- I understand that if I make any seriously misleading statements (whether or accidental) at any stage during the application process, or knowingly withhold any information, this could make the application invalid and the organisation could be liable to repay any funding which they may already have received.
- I confirm that the organisation has the legal power to set up and deliver the project described in this application form.
- I understand that part or all of the information provided may be held electronically. This information will be used for the administration of applications and grants and for statistical analysis. This information may be shared with individuals or organisations that may be consulted when assessing applications, verifying data and monitoring grants.
- I understand that if information about this application is requested under the Freedom of Information Act that Cromer Town Council may release it.

Signature

Name

Position in Organisation

Date of Application

Please keep a copy of this application

Please send your application together with supporting documentation to:

The Clerk
Cromer Town Council
North Lodge
Overstrand Road
Cromer
Norfolk NR27 0AH
Telephone : 01263 512254
Email: clerk@cromer-tc.gov.uk