



MABLETHORPE AND SUTTON TOWN COUNCIL
Library and Community Access Point, Stanley Avenue,
Mablethorpe, Lincolnshire. LN12 1DP
01507 613645 / 01507 613646

COMMUNITY RESILIENCE AND WARM SPACES FUND APPLICATION FORM

Please complete **all sections** of this form clearly and legible using black ink.
(*note: if completing using Microsoft Word you are unable to tab between boxes)

Please tick to confirm you have **read and understood** the accompanying
Community Resilience and Warm Spaces Fund Policy

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A. DETAILS

1. Name of organisation in full:
2. Name and full postal address of person making the application
(for correspondence)
3. Daytime telephone number:
4. E-mail address:
5. Organisation name cheque should be made payable to:

B. YOUR ORGANISATION

1. Registered charity number (where applicable)
2. What does your organisation do? *Please give aims and objectives. If you have a constitution, please attach this, together with any other appropriate information.*

3. Please provide a set of your organisation's latest **audited accounts or latest bank statement (if applicable)**, and details of income and expenditure for the current year.

If a large reserve and/or surplus is evident, please briefly explain why you are applying for additional funds.

C. FUNDING REQUEST

1. What is the estimated total cost of your project?
2. Amount of grant funding you are seeking? (up to a maximum £3,000)
3. a) What will you use the grant funding for?

Warm Space Provision	Community Resilience	Type (i.e., Food Bank)
Y/N	Y/N	Name

- b) Please include as much information as possible in respect of your anticipated costs, service you aim to provide and your expected recipients (continue on a separate sheet)

4. Have you applied for funds from other sources? YES / NO
(If yes, please give details (i.e., the amount and whether successful))

Source:	Amount	Successful Y / N

5. What other fund-raising efforts has, or will your organisation or group make?

6. Please indicate the expected age range and the numbers of beneficiaries you anticipate the grant funding will help (e.g., children / youth / adult / senior citizens (include visitors)).

Expected Age Range		Anticipated Numbers
Under 5 years	Yes / No	
5 to 16 years	Yes / No	
16 to 25 years	Yes / No	
25 to 65 years	Yes / No	
65 +	Yes / No	
All the above	Yes / No	

D. POLICIES / RISK ASSESSMENT

1. Please indicate if your organisation has any of the following policies (where appropriate):

Basic Risk Assessment

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Health & Safety Policy

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Safeguarding Policy
(if appropriate)

☐

DBS Check Records

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Infection Control Methods

☐

Other (i.e. 1st Aid provision)

(please specify) _____

Please submit copies (either completed / draft) with your application.

E. STATEMENT IN SUPPORT OF GRANT FUNDING REQUEST

Please use the space below to include a **Statement in support** of your request. *This **must include** details of how your organisation meets the 'eligibility criteria' set out in the policy documentation sent to you with this form. In addition, you should include details of the ways in which you would publicise how the Town Council has assisted you, (if your application is successful)*

A reference from a professional or responsible member of the community (i.e., a teacher; doctor; solicitor; Town, District or County Councillor) **must be included** with your application to support your event.

F. CERTIFICATION

I / we certify that the above information and the contents of the attached documents are correct at the time of submission. I / we understand that if any of the information is subsequently found to be incorrect this may lead to the organisation being disqualified from future consideration and/or the withdrawal of any grant awarded. I / we agree to this organisation being bound by the eligibility criteria and any conditions set by the Town Council.

Chairman/other

Name _____ Signature _____

Secretary/other

Name _____ Signature _____

Treasurer/other

Name _____ Signature _____

Date _____

If successful, the Town Council expects to be included in your publicity with the grant scheme and donation noted. Please note there are conditions attached to all grants awarded by the Town Council that identify the need and method of how to repay grants should they not be used or if your planned activities do not go ahead.

Acceptance of any funds will be deemed to be agreement of conditions within the Community Resilience and Warm Spaces Grant policy document.