

Community Environment Challenge Fund Application Form



Community
Greenspace

Perth & Kinross Council

External Funding / Community Greenspace

ExternalFunding@pkc.gov.uk

Section 1. Your Organisation Details

- 1
- 2 Are you a sub group of a larger organisation? Yes No
- 3 Which area does your group service?
- 4 What are the general activities of your group / charity?
- 5 Is your group 'not for profit'? Yes No
- 6 What type of group are you?
 Non-constituted group
 Constituted but not recognised as a charity
 Constituted and recognised as a Charity
 Constituted and enrolled with Entrust
 Constituted and registered for VAT
 School
 Other
- 7 It is essential that you have a formal constitution or agreed set of rules, do you currently have these? Yes No
*If Yes, please ensure you submit a copy with this application and compete **Section 6***
If No, please contact ExternalFunding@pkc.gov.uk to discuss
- 8 What type of grant are you applying for?
 Revenue Capital – please ensure you complete Section 7 to qualify for this

Section 2. Your Project

- 9
- 10
- Note: the project start date must be a minimum of 12 weeks from the date of application*
- 11 Tell us about your project aims:
- 12 How do you know that there is a need for this project?
- 13 Does this application form part of a larger project? Yes No
- 14 It is essential that you provide written support from all of the Ward Councillors where the Project is taking place, do you have this?
 Yes No
If Yes, please ensure you submit copies of these with your application
If No, <http://www.pkc.gov.uk/article/15505/Find-your-local-councillor>
- 15 What age are the main beneficiaries of your project?
 0-24years 25-59years 60+ years All ages

16 How you will know you project has made a difference?

17 How you will maintain the physical assets resulting from this project?

18 What would be the impact on your project if this application is not successful?

Section 3: Your Project Location

19

20 Whose land is this?

It is essential that you have a written consent from the landowner(s) for your project prior to funding being awarded, do you have this? Yes No

If Yes, please ensure you submit a copy with this application

If No, please contact ExternalFunding@pkc.gov.uk to discuss

Section 4: Financial Information

21 It is essential that you complete and submit the CECF Financial Spreadsheet in support of this application. This can be downloaded via our website <http://www.pkc.gov.uk/cecf>

Have you completed this? Yes No

*If Yes, please ensure you submit a copy with this application **and** provide summary below*

If No

Cost (£)

Itemised Goods	
In Kind Support	
Total Project Value	
Funding & Cash Donations	
CECF funding sought	
Percentage of total project value sought from CECF	

22 If successful, do you intend to ask for the CECF funding for your project prior to works taking place? Yes No

Please note: our standard practice is to allocate CECE funds in lieu on receipt of invoices on completion of the project. However, we understand that this does not always suit the needs of those who are using these funds. If you have answered YES to this question, a member of our team will be in touch soon to discuss.

23 Do you have a bank account in the name of the group stated in question 1?

Yes No

If No, please tell us whose account you will be using:

Please provide details of signatories for the account:

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I confirm I have included a letter of authorisation from a signatory of this bank account, stating that their account can be used to hold these funds: Yes

I confirm I have included a copy of a recent bank statement (less than 3 months from date of application): Yes

Section 5: Health & Safety

- 24 Do you have **Public Liability Insurance?** Yes N/A
- 25 If you have employees, do you have **Employers Liability Insurance?** Yes N/A
- 26 If your project provides services for children and young people, do you have a **Child Protection Policy?** Yes N/A

I confirm I have included a copy of all relevant policies in support of this application: Yes

Section 6. Office Bearers

- 27 *Please provide details of your groups current office bearers:*

Section 7. Capital Projects ONLY

- 28 Are the present facilities the subject of a current mortgage or similar charge? If so, give details:

- 29 If the present facilities are regularly used by other bodies, state how often and for what purpose:

- 30 Has planning permission been granted? Yes N/A
- 31 Has a Building Warrant been granted? Yes N/A
- 32 Give details of any parts of the project on which work has started or any contracts, or binding agreements entered into:

- 33 Is the site liable to:
Flooding Yes
Excessive dampness Yes
Subsidence Yes
- 34 Are the following facilities available on site:
Mains electricity? Yes
Mains drainage? Yes

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Water supply? Yes

35 What facilities does the organisation have at present?

36 Please provide name and address for the current owner(s):

37 If leased, please state:

Date of expiry

Annual Rent

If leased, are there any restrictions?

Section 8. Additional Information (Optional)

38

Section 9: Completion

This must be completed by a member of your organisation who has been approved to do so by the committee or board. All correspondence regarding this application will be sent to this individual.

To the best of my knowledge, the information given on this form gives a true and accurate account of this organisations work and needs. I confirm that I am authorised to commit my organisation in this way.

I confirm that my organisation unconditionally authorises PKC to:

- Publish details of financial support given to my organisation by PKC through this grant process.
- Use any details relating to the project obtained through this application or through subsequent assessment, to use as part of any PKC press release or publication.

On the successful allocation of funds, I agree to adhere to the conditions of grant as set out in the CECF letter of approval, including provision of adequate receipts.

I agree that, at the end of the funding period, my organisation will promptly complete and return the *end of grant monitoring form* to PKC, detailing how the money was spent and the impact on the community and local area.

I agree to the statement above: Yes I agree

Please sign:

Name:

Organisation

Address

Email

Telephone