**Peacehaven Town Council**

Meridian Centre, Meridian Way

Peacehaven, East Sussex, BN10 8BB

Tel: 01273 585493

****

|  |
| --- |
| **GRANT APPLICATION FORM** |

**The Town Council invites grant applications, which primarily support local organisations and which directly benefit residents of the Town.**

|  |
| --- |
| **ORGANISATION / CHARITY NAME:** |

|  |
| --- |
| **2. CONTACT DETAILS:**  **Contact Name: ………………………………………………………………………………………………**  **Postal Address: ……………………………………………………………………………………………**  **…………………………………………………………………………………………………………………**  **…………………………………………………………………………………………………………………**  **Email Address: .…………………………………………………………………………………………….**  **Telephone Number: …………………………………………….** |

|  |
| --- |
| **3. VAT REGISTERED: YES / NO** |

|  |  |  |
| --- | --- | --- |
| **4. REGISTERED CHARITY: YES / NO**  **Charity Registration No: ………………………..** |  | **5. DATE ORGANISATION ESTABLISHED:** |

|  |
| --- |
| **6. DESCRIPTION OF ORGANISATION INCLUDING AIMS** |
| **7. MEMBERSHIP**  **Total Membership / Service Users: …………………….**  **Membership / Service Users resident in Peacehaven …………………..** |

|  |
| --- |
| **8. REASON FOR GRANT REQUEST:**  *(eg. details of project together with numbers of those involved in the project, members and/or others, equipment, event, How many Peacehaven residents will benefit from this application?)*  **8.1 PLEASE PROVIDE COPIES OF QUOTES / COST BREAKDOWN:** |

|  |
| --- |
| **9. PROJECT END DATE**: ………………………………………… |

|  |
| --- |
| **10. AMOUNT OF GRANT REQUESTED** *(See Peacehaven Town Council Grants Policy. If you are registered for VAT, it should not be included in the amount requested)* |

|  |
| --- |
| **11. ENVIRONMENTAL IMPACT**  *(The council has declared a “Climate Emergency”, how will your grant contribute to limiting the effects of climate change? Does your project have any negative effects on climate change and how will you mitigate this?)* |
| **12. WHO HAVE YOU APPLIED TO FOR OTHER GRANTS:** *(e.g. organisations applied to and amount requested / amount received)* |

|  |
| --- |
| **13. DETAILS OF PREVIOUS GRANT APPLICATIONS:**  *(if you received a grant last year please provide details of how it was used)* |

**14. FINANCIAL INFORMATION:**

*(Please complete details below and either attach last year’s audited accounts or audited summary of accounts for your organisation).*

|  |  |  |
| --- | --- | --- |
|  | **NOW** | **ONE YEAR AGO** |
| **Current Assets** |  |  |
| **Current Cash Balance** |  |  |
| **Annual Income** |  |  |
| **Annual Expenditure** |  |  |

**Signature ……………………………............. Date …………….........**

*(person authorised to apply for and on behalf of the organisation named in Item 1)*

**Notes:**

*The Town Council considers grant applications from local organisations each year and successful applications do not imply an automatic future success – each is considered on its merits and against availability of funds. Please see Peacehaven Town Council Grants Policy.*

*Depending on circumstances, organisations that are successful in their grant application may be invited to attend a presentation ceremony for publicity purposes.*

*Please return your completed form to Peacehaven Town Council, Meridian Centre, Meridian Way, Peacehaven, BN10 8BB or email to* [*townclerk@peacehaventowncouncil.gov.uk*](mailto:townclerk@peacehaventowncouncil.gov.uk)