

TINCORNHILL QUARRY FUND GRANT APPLICATION FORM

1	Please give the name and contact details of your organisation. (A copy of the group's constitution will require to be submitted).
Name of organisation:	Telephone No:
Name of contact person:	
Position in organisation:	
Address:	
Postcode	

2	Please tell us what the grant is to be used for. Please provide as much detail as possible about your project and submit any drawings or supporting information.

3	Please tell us who will benefit from the grant.

4	Total cost of project	£
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5	Please show the total contributions to the project from other organisations	£
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6	What is the organisations contribution to the costs? (including 'in-kind' contributions)	£
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7 How much of a grant is requested from the Tincornhill Quarry fund? £

8 Please give a breakdown of the total project costs (proof of costs required).

Cost:

Total Cost

£

9 What contributions to project costs has your organization either applied for or received from other funding sources?

Name of body	Amount	Date Successful:	Awaiting Decision
Reason for Grant			

Name of body	Amount	Date Successful:	Awaiting Decision
Reason for Grant			

Name of body	Amount	Date Successful:	Awaiting Decision
Reason for Grant			

10 Please give details of your organizations main bank account. A copy of the last 3 months bank statements will require to be submitted.

Name of Bank:

Address:

Title of bank account

Account no:

Sort Code:

11 Please give details of start and completion dates of the project.

12	Please give details of how the project will be maintained in the future.		
13	Do you own the land or property to which the project relates?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

14	If no, please provide details of the owner and a letter of approval from that party supporting your project.						
<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;">Name:</td> <td style="width: 50%; border: none;">Telephone No:</td> </tr> <tr> <td style="border: none;">Address:</td> <td style="border: none;"></td> </tr> <tr> <td style="border: none;">Postcode:</td> <td style="border: none;"></td> </tr> </table>		Name:	Telephone No:	Address:		Postcode:	
Name:	Telephone No:						
Address:							
Postcode:							

15	Are any statutory consents required for the project e.g. Planning Permission, Listed Building Consent, Building Warrant, Road Construction Consent etc	Yes <input type="checkbox"/>	No <input type="checkbox"/>
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16	If yes, please provide details below and enclose a copy of the consent relating to them.																								
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 45%;">Type of Consent:</th> <th style="width: 25%;">Reference No:</th> <th style="width: 30%;">Date Approved</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		Type of Consent:	Reference No:	Date Approved																					
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17	RISK MANAGEMENT ASSURANCE STATEMENT
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The Fund and its members cannot assume responsibility for any projects. It is the responsibility of the applicant to ensure that the risk(s) arising from the planned project is adequately assessed and where appropriate an appropriate level of insurance protection is arranged.

It is recommended that applicants should seek professional insurance and risk management advice from a British Insurance Broking Association Member Company or from and Association of British Insurers Member Company.

Please sign the undernoted statement when you are satisfied that the risks have been considered and insurance cover is or will be arranged (if required) prior to the commencement of the project.

DECLARATION		
PRINT NAME	SIGNATURE	Date
POSITION IN ORGANISATION		

Please ensure the following information is submitted (if required) along with the completed application Form:

- A copy of the Constitution of the Group/Organisation
- A copy of the drawings or supporting information fro the project
- A copy letter from the landowner supporting the project
- A copy of any relevant statutory consents
- A copy of the last 3 months bank statements of the Group/Organisations
- Quotes/estimates of the project costs

I herby declare to the best of my knowledge, that the information provided by me in the above application is accurate. I understand that should the Tincornhill Quarry Fund rely on information provided by me that subsequently proved to be untrue, that an award may be revoked and repayment may be demanded.

Signature _____ Date _____

Once the application is completed and supporting information complied, please send it to:

By Post: The TQF Secretary
c/o Catrine Post Office
Gogy's
22-30 St Germain Street
Catrine
KA5 6RQ

By e-mail: tincornhill@gmail.com

FOR OFFICIAL USE ONLY

Date Received: _____

Acknowledged: _____

Fund Meeting: _____

Decision: _____

Specific Conditions: _____

Applicant Advised of Decision: _____