**TODMORDEN TOWN COUNCIL**

**START UP GRANTS APPLICATION FORM – MAXIMUM GRANT £500**

**CONTACT DETAILS**

**Applicants should familiarise themselves with the Discretionary Grants Policy and award criteria before submitting their Grant application**

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| **Date of Application:**  |  | **Ref Number:** *(office use only)* |  |
| **Name of Organisation:**  |  |
| **Address:** |  |
|  | **Postcode:** |  |

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| **Name of person making the application.** |  | **Position:** |  |
| **Telephone Number:** |  | **Email Address:** |  |
| **Website:** |  | **Beneficiary Bank Account Sort Code and Account Number** |  |

**ORGANISATION DETAILS**

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| **What type of organisation are you?** |
| 🞏 Charitable Organisation | 🞏 Unregistered Community Group/Club/Society (delete as appropriate\*) |
| 🞏 Registered Charity | 🞏 Charity Number | 🞏 Other(please state)  |
| **Do you have a constitution or a set of rules? (if yes, please enclose a copy of your constitution)** | 🞏 Yes | 🞏 No |
| **Are you part of a larger, national or regional organisation?****If yes, please give details** | 🞏 Yes | 🞏 No |
| **How many trustees, volunteers and service users are there in your organisation?** |  |
| **PURPOSE OF GRANT APPLICATION (Tick all that apply)** |
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| Community Benefit 🞏  | Community Cohesion 🞏  | Core Funding 🞏 | Civic Pride 🞏 |
| Climate Change 🞏 | Environmental Projects 🞏  | Food Growing 🞏 | Skills Development 🞏 |
| Cultural Arts & Music 🞏  | Town Centre Improvement 🞏Safety/Promotion  | Voluntary Sector YouthEngagement 🞏 | Social Exclusion/ 🞏Economic Difficulties |
| Accessibility and Inclusivity – especially Dementia Friendly 🞏  |

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| **Tell us about your organisation, its aims and the work you wish to undertake and your main activities and how you encourage engagement from all sections of the Todmorden Community**  |
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| **How will you acknowledge the Assistance of Todmorden Town Council on all promotional material - see declaration attend of application.** |
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| **Will your project have any implications in respect of climate emergency and if so, how do you intend to minimise such impact?** |
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**DETAILS OF FUNDING REQUESTED**

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| **What is the purpose of your request for a grant?** |

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| 🞏 Town Hall Hire🞏 Project Delivery | 🞏 Core Funding 🞏 Event🞏 Other (please specify)  |

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| **What is your project called?** |  |
| **When will your project start and finish?** | **Start Date:** | **Finish Date:** |

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| **How will your project benefit the local community within the Todmorden town boundary? (Use a separate Sheet if necessary).**  |
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| **Why is this project needed? What advantage will it bring to Todmorden?****How many people within the Todmorden town boundary will benefit from the project?** |
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| **Please include dates and venue of events if applicable – please include a draft programme if available.** |
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**PROJECT COSTS AND FINANCES**

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| --- | --- | --- | --- |
| **Total Cost of Project:** | **£** | **Amount Requested:** | **£** |

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| **Have you or this group previously applied for or received any other grant for this project? If yes, please complete below.** | 🞏 Yes | 🞏 No |
| **Applied to:** |  |
| **Date(s) applied for:** |  |
| **Received From**  |  |
| **Date(s) received** |  |
| **Amount(s) received** |  |

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| **Budget:** This budget should be for the **total cost** of the activity you are applying to do. Please be as accurate as you can, as you may be asked to explain any amount which is unclear. Attach a separate budget sheet if you have done this work already. Please also provide estimates/quotations of the proposed items of expenditure you may use. |
| **Expenditure items** | **Cost (£)** |
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| **A: Total Expenditure** | **£** |

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| **Other Income Sources (state from whom and whether confirmed)** | **Total (£)** |
| From your own resources (including public fundraising) |  |
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| **B: Total Income**  | **£** |

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| **C: Sum requested from Todmorden Town Council** | **£** |
| **D: Total income (must be sum of B & C above) and equal to figure A** | **£** |

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| **How much do you receive from your main funder?** | **Per year** |
| **Please attach any other information you think is appropriate for this project, e.g. insurance cover, health and safety issues, planning permission received, quotations from suppliers and any other relevant information to support your application.** |

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| **Applicants must supply one reference.**  |
| **Reference Name** | **Reference contact details** |
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**TOWN COUNCILLOR SUPPORT – is this application supported by your local ward Town Councillor?**

🞏 Yes 🞏 No

**CHECKLIST AND SUPPORTING DOCUMENTS**

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| **Please enclose the following documents with your application. We will only process your application once we have received them.** |
| **🞏** | You are required to supply one reference. |
| **🞏** | Copy of your organisation’s constitution or set of rules or general statement of intent to provide such for the organisation. |
| **🞏** | Details of the groups/associations bank account sort code and account number.  |
| **🞏** | Evidence of any other awards received towards the project cost e.g. copy of award letter.  |
| **🞏** | A copy of the organisation’s decision to apply for the grant signed by a minimum of two of the organisation’s members.  |
| **🞏** | Any other information that is appropriate or relevant to this application (e.g. insurance cover, health and safety issues, planning permission received) |
| **If you are unable to supply this information, please contact the Town Council** **office for advice prior to submission.** |

**DECLARATION**

* I am authorised to make this application on behalf of the above organisation
* I certify that the information contained in this application is correct
* I confirm that I have read and understood the Council’s criteria for its small grants scheme
* If the information in the application changes, I will inform Todmorden Town Council as soon as possible
* I give permission for Todmorden Town Council to record the details of my organisation electronically and contact organisation by phone, mail or email with information from time to time
* I agree to the terms and conditions of the grant criteria stipulated on this form and will provide evidence to the Council to show that the grant has been used in the manner it was intended and will repay any funds that have not been used towards the grant
* I agree to promote Todmorden Town Council in all publicity activities in support of the grant awarded
* I agree to comply with any other terms and conditions that the Council may attach to the grant
* I agree to return any unspent grant monies awarded

**Acknowledging the contribution from Todmorden Town Council**

**This is public money used to support local good causes. We would expect Residents to be made aware of this wherever your organisation is able to do so through use of the Council’s crest and commentary wherever the opportunity arises.**

* **Press Release on award of Grant.**
* **Web Site acknowledgement that Todmorden Town Council has provided a Grant and the amount provided.**
* **Social media post on award being given.**
* **Any literature promoting the project and or purpose of the grant.**
* **Inclusion of crest on letter footer as funders/part funders of organisation.**

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| **Applicant Signature: Date:** |

**PLEASE SUBMIT YOUR COMPLETED APPLICATION FORM TO:**

**THE TOWN CLERK**

**TODMORDEN TOWN COUNCIL**

**TODMORDEN COMMUNITY COLLEGE**

**BURNLEY ROAD**

**TODMORDEN**

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| **GUIDELINES FOR START UP GRANT APPLICATIONS** |
|  **Activities that will not be supported.*** Applications by individuals.
* Regional or National organisations, unless they are for a specific project benefitting Todmorden residents, not part of their core funding responsibilities
* Commercial organisations.
* Purposes for which there is a statutory duty upon other local or central government departments to fund or provide.
* “Upward funders” i.e. local groups where fund-raising or a tithe of all funds is sent to a central HQ.
* Political parties.
* Activities of a predominately religious doctrine.
* Multiple applications by the same organisation in one year will not be supported.
* Any activity that is used as a means of raising funds for subsequent donation to another cause.
* Any award that contributes towards general routine maintenance of buildings or equipment
* Where the outcome for the grant results in a situation where the applicant’s overall income for the event/project, excluding donations, exceeds expenditure and the surplus is then used to donate to another cause. Any applicant intending to raise funds for a good cause should do so by way of donations of a voluntary nature and separate to the event activity net cost of delivery itself.
* Sponsorship.
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| **CONDITIONS FOR START UP GRANT APPLICATIONS** |
| * Only applications using the approved form will be considered.
* Retrospective funding will not be agreed.
* Only organisations with volunteer involvement will be considered.
* The organisation needs to have a bank account controlled by more than one signatory.
* The organisation needs to have a constitution and/or governing document if successful for this grant application.
* The group/organisation should be active within the borders of the Township of Todmorden.
* The group/organisation should normally provide a benefit, service, support, entertainment or information.
* Todmorden Town Council will provide grants both for projects and core funding.
* The Town Council will only provide funding up to a maximum of £500. However, please bear in mind that the Town Council has very limited resources and grants usually range from £100 - £250 for start-up core funding.
* The whole sum required will not normally be provided, and it is expected that the group

will provide either some funding or volunteering time themselves (i.e match funding should not just be other grant scheme funding).* Completion and submission of the Grant Report Back form is essential within six months of

receipt of the grant payment. This is required by the Council to be able to show tax-payers how their money has been spent in order to comply with the law and audit requirements.* Applications will need to be submitted at least one week in advance of the next Amenities Committee meeting.
* It is important that all information provided is accurate and up to date, as incorrect information may affect the outcome of the application.
* No award will be given if the effect of this is to increase that organisation’s reserves which will then be available for use on other projects not approved by Todmorden Town Council.
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|  | **New start up Organisation / Group** |
| **Project cost**  | **Maximum Grant award**  | **\*Volunteer/ time Matched funding considered as contribution**  | **Frequency of Grant** | **Subsequent year consideration** |
| Up to £500 | 100% | Not applicable  | One-off grant  | Not for ongoing revenue support but consideration under existing organisation grant criteria  |