

# Grant Application Form (2017/2018)

Please indicate which grant  
you are applying for

Community Grant-

S106 Grant-

Flood Grant-

Project Title

## 1 Organisation Details:

Organisation Name

### Official or registered address

Telephone No

Postcode:

E-mail:

Name of  
main contact

Position

Does this person have official authority to submit this application?

Yes

No

### Address for contact person if different from above

Telephone  
No

Postcode:

E-mail:

Date organisation established or  
incorporated

Type of  
organisation

If a Registered Charity, please  
give number

VAT registration  
number (if any)

Is this application from a consortium of organisations?

Yes\*

No

\*If yes, please list included organisations:



## 2 Membership and Usage

Are you a membership organisation?

Yes

No

If yes, is membership open to all?

Yes

No

What is your current membership?

Launching on 1st Aug

What are the annual membership fees?

£5

## 3 Bank Account Details

Account Name

Helmsley Community Library

Sort Code

40 - 24 - 05

Account Number

91384759

Address

Barclays, Scarborough

## 4 Project Details

Postcode

Where will the project take place

Helmsley Community Library

When is the project expected to:

Start

immediately

Finish

ongoing

Please summarise your project (100 words maximum)

Helmsley Library became community run in April 2017. The volunteers are increasing the opening hours from 1st August from 16 1/2 hours to 18 hours per week. The biggest challenge we are facing at the moment is dealing with Tourist Information queries without having the facilities or information. To combat this we are looking to purchase a laptop and furniture to be used to set up our own VI Point.



Why is the project needed?

We are inundated with Tourists wanting information on a daily basis.

Please give details of any consultation undertaken in planning your project with either the wider community or target audience for the project eg parish plan or questionnaire

We are working closely with Helmsley in Business on this project.

Please indicate how you will measure the success and impact of your project

The ease and amount of information we are able to provide to visitors. Volunteers feeling equipped and comfortable to deal with requests.

How does your project meet the priorities of the Council?

Culture, leisure and tourism

Please give details of any special fundraising activities for the project

**5 For capital projects only**

Is planning permission required?

Yes  No

If yes, please indicate status of the application with dates

Applied for:   
(date)

Granted:   
(date)

Outline, Full, Listed building

Does your organisation own the property for which you are seeking a grant

Yes  No

If no, do you have a lease on the property?

Yes  No

Please give the name of the person or organisation who own the building

The length of any lease and unexpired term:



## 6 Project Budget

### Expenditure - List items of expenditure

Capital Costs	Amount (£)
VAT	
<b>Total Capital Cost (a)</b>	0
<b>Revenue Costs (Community grant only)</b>	<b>Amount (£)</b>
Laptop	400.00
Furniture	100.00
Running costs	500.00
<b>Total Revenue Cost (b)</b>	1000.00
<b>Total Cost (a+b)</b>	1000.00

### Income - please specify how you will pay for the project


	Amount (£)
Ryedale District Council Grant required	1000.00
Own funds	
Local fundraising	
VAT (if able to reclaim it)	
In Kind (eg volunteer time)	54 hrs per week
Other	
<b>Total Income (c)</b>	1000.00

Please note, your Total Costs (a+b) must equal your Total Income (c). For Community and Flood grants, the grant requested must not be more than £5,000 or 25% of Total Costs (whichever is the lesser) unless you are requesting a grant for project costs of up to £1,000.

### 7 Declaration: I declare that:

- The information on this application form and the supporting information enclosed with it is accurate to the best of my knowledge
- The project falls within the organisation's purposes
- My organisation has power to accept a grant subject to the grant conditions stated

The application form should be signed by the Chairman or Chief Executive of the applicant organisation\*.

Signed		Date	12/7/17
Name	Joanne Brown	Position	Chair of Trustees

\*An electronic signature is acceptable and can be entered below.

