Immingham Town Council



Grant Applications 2023

Approved July 2023 Review July 2024

Guidance Notes for Grants Fund Applications

Immingham Town Council awards grants to local organisations to assist them to achieve their aims and objectives. (Grants will normally not exceed £1000). The Council has a policy of only assisting truly local community groups, and this is interpreted to mean those organisations based in Immingham or national bodies with an independent branch in Immingham, providing support to the residents of Immingham.

How an application is considered?

All applications will be considered on their individual merits.

The Town Council will consider applications on the following basis:

- How well the grant will meet the needs of the community
- How effectively your group will use the grant
- Whether the costs are appropriate and realistic
- Level of contributions raised locally
- Whether the applicant could reasonably have been expected to obtain sufficient funding from a more appropriate source
- How the group is managed
- How the grant positively benefits residents residing within Immingham

It would be beneficial for you to attend the meeting to provide any additional supporting information and answer any questions the Council might have

Applicants must fulfil at least two of the Town Council's General Aims & Objectives:

- Engaging make sure you have a say in projects
- Including the hard to reach and the vulnerable
- Communicating let you know what is happening
- Enabling make sure you can get access to services
- Delivering services for the community
- Partnering look to work with others to benefit the area
- Leading governing in a responsible way
- Listening let the community have a voice
- Learning be open to new things
- Innovating be prepared to try new things
- Transparent make sure all we do is open to scrutiny
- Financially sound make sure we are value for money
- Environmentally aware make +ve impacts on the environment
- Support the local economy trying to support local traders
- Responsive act when we need to

Who cannot apply?

- Any group whose aims the Town Council considers to be working within a business or profit making remit
- Grants may not be made to individuals
- Applications must be from a properly formed group, club, committee or charity, which must show that the group has charitable/community aims

What it will fund?

- Grants will fund either new projects or continued services with funding lasting no more than 3 years
- Grants may be used as match funding
- The application form, accounts and other information will be placed on the public agenda of the Town Council . No personal data will be disclosed
- The Town Council must be satisfied that the funding is of commensurate benefit to the residents of Immingham
- Successful applicants will be required to submit a monitoring form on the success of their project
- The final decision on assessment of applications and the level of any award offered lies with Immingham Town Council
- Recognition of the grant from Immingham Town Council must be made in any publicity and acknowledged on any letterheads and promotional documents

How to apply?

- Applications for funding must be made on the Grants Application Form
- Only one application per financial year can be submitted by an organisation
- Additional information e.g. Leaflets, literature, annual reports etc which would evidence of previous work undertaken are also welcomed



IMMINGHAM TOWN COUNCIL

GRANT APPLICATION

Please answer all questions – failure to do so may result in a delay in the determination of your application

Q1 Contact Details

Name of organisation making application:

Name of your project (if this is different):
Name of contact for this application
Title:First Name:Surname:
Position held in the organisation:
Contact Address, including full postcode:
Postcode:
Contact Telephone Number:
Email address:

About your organisation

Q2 What type of organisation are you?

Tick (\checkmark) relevant category:

Registered Charity: () Charity Registration Number	
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Voluntary Organisation: ()

Company Limited by Guarantee: () Company Number

Other – Please specify:-

Q3 When was your organisation established?

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Q4 Briefly, describe the purpose of your organisation.

Describe the usual activities/services you provide.

If you are a new organisation, describe the services/activities you plan to provide.

Q5 Are you are a subsidiary of a larger organisation, please state which one.

.....

Q6 Previous Applications

If you have applied for and received funding from Immingham Town Council in the past please provide details of the amount, the year and briefly what the funding was used for.

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Details of the project or activity you are planning (or room hire)

Q7 Describe the projects/activity you plan to use this grant for.

i) Try to be specific about what you will do and how you will do it.

the se	Please state how you have identified this need and how the project will benefi e people of Immingham, together with the estimated time span. If you are eking continuation funding for this project, please provide evidence for this ntinued need.
,	How many people from Immingham do you expect to nefit directly from your project or activity?
	hich criteria will be used to measure the success of the project and how
ma	any people from Immingham do you expect to benefit from it?
He	ealth & Safety
Ar	e there, if any, special safety issues are related to your project/activity?
Pl€	ease provide the following information –
i)	What kind of insurance does your organisation have?
ii)	Do the leaders have the relevant qualifications and/or experience?

iii) What policies does your organisation have in place (i.e. Health and Safety,

Child Protection, Working with vulnerable adults, Equal Opportunities, CRB

Checks etc.)? You may be required to submit copies of your policies

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Funding of your project

Q10 Please provide details of the amount of funding you need for your project and give us a breakdown of what the money is for (please enclose any relevant estimates or details).

Tell us the amount of grant requested £..... and provide a detailed breakdown as to how you have reached this figure.

Project Items E.g. Staffing, Specific Equipment, Room Hire etc	Amount of Project	Amount Requested
	£	£
	£	£
	£	£
	£	£
	£	£
	£	£
	£	£
Total	£	£

Please continue on a separate sheet if required

Please list the amounts and sources of funds that you expect to receive from other funding sources to fund this project.

Funding for Project	Amount received
	£
	£
	£
	£
	£
Total	£

How project is to be funded

Your Accounts

Q11 Please provide the following details from your most recent annual accounts

Total Income	£
Less Total Expenditure	£
Surplus / Loss	£
Savings (Reserves, Cash, Investments)	£

Account Details

Q 12 Please give us your bank or building society account details

You can only apply for grant if you have a bank/building society account in the name of your organisation. We will only pay grants into an account which requires at least two people to sign each cheque or withdrawal. These people should not be related.

Account name:
Account Number:
Sort Code:
Bank/building society name:
Bank/building society address

Who are the signatories and what position do they hold in your organisation?

1	Name	Position
2	Name	Position

Q13 Any other information which you consider to be relevant to your application.

Declarations

Q14 Declaration

Please give details of a senior member of your organisation. For example, this may be your Chairperson, Treasurer or Secretary. They must read the application and sign below. (This must not be the main contact name in Q1).

I confirm, on behalf of(insert name of organisation):

That I am authorised to sign this declaration on its behalf, and that, to the best of my knowledge and belief, all replies are true and accurate.

I confirm that I have read the Terms and Conditions set out in the Notes which accompanied this application and further confirm that this application is made on the basis that if successful, the organisation will be bound to use the grant only for the purpose specified in this application, and will have to comply with those Terms and Conditions and any others which the Council might attach to the Grant.

Post held in organisation:

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Title - First Name:- Surname:

Organisation address:

	Postcode:
Telephone:	
Signed:	Date:

Q15 Signature of Person Completing the Application

This must be the signature of the person named in Q1 as the main contact and **not be the same person who has signed in Q14**

I confirm that, to the best of my knowledge and belief, all the information in this application from is true and correct. I understand that you may ask for additional information at any stage of the application process.

Signed:Date:

Please return your completed application form to:

Town Clerk Immingham Town Council Civic Centre, Pelham Rd Immingham DN40 1QF

Telephone: 01469 727272 Email:enquiries@immingham-tc.gov.uk