



# HIGHAM FERRERS TOWN COUNCIL

## GRANT APPLICATION FORM

Name of Organisation	
Address	
Contact Name	
Position in Organisation	
Address if different from above	
Telephone Number	
Email Address	
Website Address	
When was your organisation formed?	
What are the organisation aims and objectives?	
Is your organisation a registered charity? Is yes please give the number.	
Is your organisation part of, or affiliated to any national organisation? If yes, please give details.	
What is the catchment area for your organisation?	
How many members do you have?	
How many members live in Higham Ferrers?	



<p>Describe the project/purpose for which you require a grant? <i>(Use extra paper if required)</i></p>	
<p>How will the project benefit the community/residents of Higham Ferrers and how do you know there is a need for it? <i>(Use extra paper if required)</i></p>	
<p>Is your organisation VAT Registered?</p>	
<p>Start Date of Project?</p>	
<p>Expected End Date</p>	
<p>Estimated Cost of Project. Please give a breakdown.</p>	
<p>Funding of Project. Please indicate how your organisation plans to fund the project.</p> <p>Funds immediately available from your organisation</p> <p>Fund that you intend to raise yourself from events</p> <p>Grants from other sources. Please details</p>	<p>.....</p> <p>.....</p> <p>.....</p>



Grant Request from Higham Ferrers Town Council	.....
Please give details of any reserves or savings held by your organisation.	
Have you applied to other organisation for funding for this? If not please give reasons?	
Have you received a grant from Higham Ferrers Town Council in the last 3 years? If yes, please give details.	
To assist the Council in processing this application, please give any details you feel may be significant in helping to explain and justify your request for a grant. <i>(Use extra paper if required)</i>	

**If incorrect, inaccurate or misleading information is provided the council may refuse your application. Any fraudulent claims will be refused.**

**We declare that any grant made will be used solely for the purposes outlined in this application. I understand that Higham Ferrers Town Council reserves the right to claim the grant in any event it not being used for the purpose specified.**

**We have read, accept and fully understand the grants criteria. (Two officers to sign)**



NAME .....

**Signature on behalf of applicant**

Position .....

NAME.....

**Signature on behalf of applicant**

Position.....

**Date of Signatures.....**

**DOCUMENTS TO SEND WITH YOUR APPLICATION**

**A copy of your accounts.**

**Copy Bank Statements**

**Constitution**

**Copies of quotes**

**CLOSING DATE: 30<sup>th</sup> October**

**Return to: -**

**Higham Ferrers Town Council**

**Town Hall**

**Market Square**

**Higham Ferrers**

*We take the processing of your data seriously and will only hold your personal details for as long as is necessary. We will not share your personal details with any third party unless required to do so by law or if you have expressly permitted us to do so.*

*A copy of our Privacy Policy is available from [www.highamferrers-tc.gov.uk](http://www.highamferrers-tc.gov.uk) or the Town Council Offices.*