Mrs Mandy Evans Clerc y Dref a Swyddog Cyllid



Mrs Mandy Evans
Town Clerk & Finance Officer
Town Hall
Llanddulas Road
Abergele
Conwy
LL22 7BT

Ein Cyf /Our Ref: ME/LW

Eich Cyf / Your Ref:

Tel: 01845 833242 Fax: 01845 833780

info@abergele-towncouncil.co.uk

GRANT APPLICATION 2018

Guidelines

Applications are invited annually from Voluntary Groups, Community Groups or Charities operating in the Abergele area.

ALL APPLICATIONS must be accompanied by the following:

For applications under £1000

- Copy of latest available Statement of Accounts
- Covering letter on headed paper
- Copy of latest bank statement

For applications over £1000

- Copy of latest available Audited Accounts
- Covering letter on headed paper
- Copy of latest bank statement

Completed applications should be submitted to:-

The Town Clerk
Abergele Town Council
Town Hall
Llanddulas Road
ABERGELE.
LL22 7BT

Grant applications for 2018/19 must be received by either 30 September 2018 or 31 January 2019.

<u>Please note that applications submitted without the relevant documents as listed above will not be</u> considered.

(Applications of an urgent nature may, at the Council's discretion, be considered at an earlier meeting of the Policy & Finance Committee)

Application for Grant Funding 2018

Details about your organisation / group Name of Organisation / Group: Name of Secretary:Post Code: Tel: E-mail address: Name of Treasurer: Address:Post Code: Tel: E-mail address: What are the main aims / objectives of your organisation? Where and when does your organisation meet? (if applicable) **Project / Activity Details** £..... How much money are you applying for?

| For what purpose? | (please continue on a separate sheet, if required) |
|------------------------|--|
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| | |
| Please provide a brea | akdown of the estimated total costs of the project/activity/event: |
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| | |
| Please provide detail | s of any other sources of income to be used towards this project/activity/event: |
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| | |
| Approximately how m | nany people from the Abergele area will benefit from this |
| project/activity/event | ? |
| | |

| Has your | Organisation / Group received a grant from t | this Cou | nci | l pr | eviously? | | |
|------------|--|-----------|------|------|--------------------------------------|--|--|
| YES /NO | If YES, please provide details: | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| - | rovide any other information that you would wing this application: | vish the | Co | unc | cil to take into account when | | |
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| Stateme | nt (to be completed by the Chairman/Secreta | ry/Treas | sur | er c | of the Organisation) | | |
| | that all the information on this form is true an pecified purpose(s) only. | d correc | ct a | nd | that any grant received will be used | | |
| | that I have enclosed a copy of the following cate reason below): | docume | nta | tion | to support this application (if not, | | |
| • C | opy of latest Audited or Statement of account | ts Y | / | N | (whichever is applicable) | | |
| • C | opy of latest bank statement | Υ | / | Ν | | | |
| • C | overing letter on headed notepaper | Υ | / | Ν | | | |
| Abergele T | OTECTION AND AUTHORISATION OF USE fown Council will use submitted details internally for additional data it will be processed in accordance with | | | | | | |
| Name: | | Position: | | | | | |
| Signature | ā. | Date: | | | | | |