

CRATHES, DRUMOAK AND DURRIS COMMUNITY FUND

Large Project Application Form (Spend over £1000)

Before completing this form, please read our guidelines. Copies of forms, guidelines and advice on the application process and timings are available from: www.durris.net or www.marrareapartnership.org.uk

Some questions may not be applicable to your application, please answer these "NA".

If you require more space for you answers please continue on additional sheets of paper.

SECTION A: YOUR ORGANISATION		
1	Name of your organisation	
2	Address Please provide the address for correspondence	
3	Contact details: Name Your contact must be someone who can talk about the application and funding needs in detail	
4	Position in organisation	
5	Address (if different from that above)	
6	Tel (day)	
7	Tel (evening)	
8	E-mail	
9	Geographic area covered by organisation The application for which you are seeking support must fall within our designated areas - see our guidelines	
10	How many members are in your organisation?	
11	How often does your organisation meet up?	

12	How many paid staff does your organisation have?	
13	Describe your organization and Committee/Management structure	
14	How many volunteers / Non Managers does your organisation have?	
15	Others? (please describe role)	

16	<p>Are you a registered charity? You do not need to be a charity to apply but you will need to enclose your constitution or a simple set of signed rules</p>	
17	<p>If yes, state your charity registration number</p>	
18	<p>Is your group part of a larger organisation or purely local?</p>	
19	<p>In this section, you should detail why your group was set up, what the aims and objectives are and who the beneficiaries are for the work you carry out</p>	
<p>Give details of the plan and what you want it to achieve</p>		

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SECTION B: YOUR PLAN		
20	Title of scheme for which you are seeking support	
21	Does the plan have a specific location?	
22	If Yes, where is it located	
23	Why does your community need this application? Please tell us about any preliminary community consultation, feasibility study or other evidence of need	

25	Which of the following criteria do you believe it meets? Please tick all that apply	
	Helps to improve and sustain wildlife and the environment	
	Helps to unite the community	
	Promotes health and well being	
	Benefits disadvantaged and disabled people	
	Benefits children and young people	
	Benefits older people	
	Provides improved access to countryside and/or local amenities	
	Restores derelict land for community benefit	
	Preserves local heritage	
	Improves transport links for the community	
	Improves communication links for the community (newsletters etc.)	
	Supports educational development	
	Community building development	
	Voluntary self help group	
	Is energy efficient	
	Other (please specify)	

26	Is the funding for a development?	Go to Question 28
27	Is the funding for something else?	Go to Question 37
28	Who will carry out the work?	
29	Will it involve volunteers or a contractor?	
30	How will the application be managed? Please state how it will be managed in both the short and long term	
31	When will the application start and finish and are there any key landmarks along the way?	
32	How will you judge the success of the application? If you have benchmarks/ targets please tell us about them. Be realistic as we shall use them in monitoring the application	
33	If your application involves land or building that your organisation does not own, who is the landowner and do you have their full permission?	
34	Include here details of an leasing arrangement or if you intend to buy property	
35	Does this project require planning permission? If you require planning permission have to applied for, or obtained permission?	
36	Are you working in partnership on this application with any other groups? If so, please identify them Include the names of any community, voluntary or statutory organisations that you are working with or are supporting you	

37	Will the benefit of the fund be fully accessible to the public?	
38	How many years do you expect the benefit of this fund to last?	
39	How often will the benefit of this fund be utilised?	

50	<p>Will a grant from us assist in triggering match funding from elsewhere?</p> <p>Match funding is not a condition of a grant from us but may assist your case</p>	
51	<p>Will there be any longer term funding requirements for this application in order to sustain it into the future?</p>	
52	<p>If so, is this source of funding in place?</p>	
53	<p>Have your organisation successfully received funding from the Crathes, Drumoak and Durris Community Fund previously? When, and how much did you receive?</p>	
54	<p>If a grant is awarded, to whom should the cheque be made payable and to what address should it be sent?</p> <p>This could be your Organization or the contractor. Cheques cannot be made payable to individuals</p>	
55	<p>Please describe how this project provides value for money and the steps you've taken to ensure this.</p>	

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This area should be used for any other information deemed relevant to your application not already stated

DECLARATION

We are authorised to submit this application on behalf of the organisation and certify that the information enclosed is correct. By signing this application form, we agree to abide by the terms and conditions included in the grant guidelines and any additional special conditions within the letter of award. We understand that we will be required to monitor expenditure and to provide the Crathes, Drumoak and Durris Community Fund with receipts and reports on the progress of the application as required. We give permission for the fund to record the information in this form electronically. We also give permission for the fund's involvement in our application to be publicised.

Signature 1

Date

Position

Signature 2

Date

Position

INDEPENDENT REFERENCE

This section should be completed by someone who knows your organisation and can support your application.

Name

It cannot be a member of your management committee, a volunteer or user of your group.

Occupation

Contact address

Daytime telephone

I can confirm that I know the applicant organisation. I have read this application and the request for funding. I support the proposal and am happy to be contacted to discuss the application further.

Signature

Date

CHECKLIST

Please ensure that you have included the following information as it applies to your application. Failure to do so may delay or jeopardise your application. Please use the tick boxes or mark "NA" if not applicable.

The completed application form signed by two people

A copy of your constitution or set of rules for your organisation signed by each of the members of your management committee

A set of accounts for your organisation signed by your treasurer, or for groups less than one year old - a recent bank statement and annual budget

If your organisation relates to children or vulnerable people, copies of your Child Protection Policy and Vulnerable Persons Policy

CHECKLIST FOR DEVELOPMENT PROJECT

Location plan for the application

Photographs of the site (if appropriate)

Detailed plans

Sketch of the work proposed

Evidence of the land owner's permission (if appropriate)

Evidence that planning permission (if appropriate) has been obtained.

WHERE TO SEND YOUR FORM

Please return the completed form to:

**Mark Ansell, Windfarm Sub Committee
Crathes, Drumoak and Durris Community
Council
Durrisdeer
Denside of Durris
Banchory**

	AB31 6DR
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