

MEMBERS COMMUNITY INFRASTRUCTURE FUND
(2018/2019 and 2019/2020)

APPLICATION FORM (to be read in conjunction with the accompanying Guidance
Notes)

(Applicable to the 42 Wards in Neath Port Talbot)

1.1

| |
|---|
| Name of Councillor submitting the proposal for funding |
|---|

1.2

| | |
|-------------------------|--|
| Contact Address: | |
| Postcode: | |
| Telephone: | |
| Mobile: | |
| Email: | |

Your project's need for funding and how this can be addressed using the Fund Criteria

2.1 Please describe the project you wish the Members Community Fund to support.
(This may be revenue or capital investment)

2.2 How have you identified the need for the project?
(Please state how you have arrived at this project proposal and how you know there is a need for the investment).

2.3 What genuine long term community benefits do you anticipate as a result of the investment?

What outcomes do you hope to see?

2.4 Demonstrate how the project will be sustained after the investment?

How will the project be maintained? How will the investment be protected?

Project Costs

3.1 Please provide a breakdown of the total cost of this project excluding VAT (this cost can exceed the £10,000 allotted per member if match funding has been identified as part of the funding package).

| Item | £ Amount | Tick if you are applying for this item from the Members Community Fund |
|---|----------|--|
| | | |
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| | | |
| | | |
| Total amount required for the whole project (exclusive of VAT) (A) | | |
| Total VAT for this project (B) | | |
| Total Project Cost (A)+(B) | | |

3.2 Is the proposed investment intended to (choose one option only):-

1. Enhance Existing Council Services?
2. Assist Voluntary Sector providers?
3. Form part of a more complex project which would require input from the PDFU to facilitate its delivery?

The Project Development & Funding Unit (PDFU) will work with the Member to examine how the total project cost has been arrived at, its validity, whether contingency has been built in and whether the proposal is deliverable under the current proposed funding arrangements.

3.3

| | |
|--|---|
| How much money are you asking the Members Community Fund for? | £ |
| How much have you raised elsewhere for the project? Please list funders and amounts below. | |
| | £ |
| | £ |
| | £ |
| Please list other funders you have applied to for this project but have not yet received approval, the respective grant amounts and the date the outcome of the application will be known (if you have failed to attract match funding please list the sources you have explored and exhausted). | |
| | £ |
| | £ |
| | £ |

3.4 Other Information – Please outline any other information which you think would help strengthen your bid to the Fund.

Conflict of Interest

In the making of this Application you must declare any conflict of interest which could arise from financial, personal or family involvement within the Organisation which hopes to be a recipient of a grant from the Fund.

Please declare as appropriate (leave blank if there is no perceived Conflict of interest which might otherwise create a danger of bias).

| | |
|--|---------------|
| Please state nature of Interest(s) – i.e. as a Trustee, Committee Member, family member, employee, etc. | Signed |
|--|---------------|

Declaration

- I am authorised to make the Application.
- I certify that to the best of my knowledge the information contained in this Application is correct.
- If the information changes in any way I will inform the Grant Management Organisation (GMO) acting for the Members Community Fund immediately.
- I further confirm that if successful, I agree the following conditions:
 - ✓ Use the grant only for the purpose in the offer letter
 - ✓ The invoices submitted under this Scheme not being used to claim grant aid from other sources for the same expenditure
 - ✓ Agree to monitoring visits, post Award
 - ✓ Not to use the funding for any projects that conflict or adversely affect the aim or policies of the Council.

| | | | |
|--------------------------------------|--|--|--|
| Name (Block Capitals) | | Electoral Ward (Block Capitals) | |
| Signed | | Date | |

Checklist

In its appraisal of the proposed project the PDFU must be convinced of the project's worth and its suitability to go forward to Cabinet for assessment. If the project is to 'Enhance Existing Council Services' the PDFU will work with other Council Departments to check that the project is workable in terms of affordability and deliverability. If the benefit of investment is to 'Assist a Voluntary Sector provider' it is important that the Council has confidence in that organisation.

If the latter situation prevails the Member should work with the Organisation and then, as part of the Application made, enclose separately:-

(Tick box to indicate enclosed)

- A signed and dated constitution**
- Audited Accounts** If a new organisation, please provide a copy of current bank statement (showing the account name and details)
- Bank Account details in the name of the Organisation** – Name & address of Bank, Bank Account Number and Sort Code
- Two named Bank signatories and their position in the Organisation**
- A competitive, valid Quote for the services to be provided and/or a competitive, valid quote for the essential items of capital equipment that are to be procured from an Award**
- A current Insurance Policy** (Appropriate to the project, facility or activity to be developed)
- Freehold tenure or Lease Agreement** (where applicable)

IMPORTANT

Please ensure you have answered every question as incomplete Application Forms will take longer to process.

Please return your application marked 'Members Community Fund' to:

The Project Development & Funding Unit (Room 307B)
Education, Leisure & Lifelong Learning
2nd Floor
Civic Centre
Port Talbot
SA13 1PJ