

New Homes Bonus 2017 Application Form

Note: Before completing this form please read through the relevant guidance and eligibility documents. Either type your answers into a saved version of the form, or hand write in BLOCK CAPITALS. For an application pack in an alternative format, please call the Communities Team (01243) 534864.

Section 1: CONTACT DETAILS

1. Name of your Parish Council

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2. Contact for this application

(if different to the Parish Clerk, whose details will be on record)

Full Name:	Position in organisation:	
Address for correspondence:		
Telephone (daytime): Best time to call:	E-mail:	Any communication needs? (e.g. Textphone)

Section 2: YOUR PROJECT

3. What is the name of the project that you would like funding for?

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4. Project summary

(i) Please give a brief description of the project and its purpose
(ii) What is the total cost of your project? £_____
(iii) What amount are you requesting? £_____
Please note, if your request is for £10,000 or more, you will also need to submit a business plan or project plan. For further information on this please refer to the Guidance Notes or the Eligibility criteria.

(iv) Has this project been identified in the District Council's 'Infrastructure Business Plan (IBP)?

Yes please provide the reference no. IBP id/ (if yes, please go to Q9)

Link to IBP <http://www.chichester.gov.uk/article/27165/Infrastructure-Business-Plan-including-CIL-Spending-Plan>

No (if no, please go to Q5)

N/A (as Parish/project in South Down National Park, please go to Q5)

Evidence of community need

5. How did the Parish decide to champion this project?

Please give examples of any process undertaken to support this project eg community consultation, article in local newspaper/parish newsletter, advertised on parish website, project identified through Neighbourhood Plan etc.

6. What evidence is there that the project is needed?

7. What support is there for the project within the wider community?

8. Tell us where the nearest similar service, facility or project is.

Local benefits

9. What is the expected benefit of the proposed project?

10. Who, in particular, will use or benefit from the proposed project?

Project sustainability

11. Please specify the intended outcomes of your project or service and how will these be monitored?

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Details about your project

12. Project delivery

(i) Will the Parish Council be delivering this project?

Yes (if yes, please go to Q13)

No

(ii) If No, who is your delivery partner?

Address:

Contact name:

Telephone number:

Email address:

(iii) What type of organisation are they? (delete as appropriate)

Registered Charity / Company Limited by Guarantee /

Community Interest Company / Other Constituted Organisation (describe)

Charity and/or Company Number

iv) What checks have you undertaken to determine their suitability as a delivery partner?

13. When are you planning your project to take place?

When will it start: _____

When will it finish _____

Key milestones (with anticipated dates): _____

14. How will the delivery of the project be managed?

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15. Tick below to indicate if the project has any of the following. If it has, please enclose a copy of the relevant policy

• Health and Safety policy	Yes <input type="checkbox"/>	No <input type="checkbox"/> or N/A <input type="checkbox"/>
• Child Protection and Vulnerable Adult policy	Yes <input type="checkbox"/>	No <input type="checkbox"/> or N/A <input type="checkbox"/>
• Affiliation to a governing body If yes, tell us who	Yes <input type="checkbox"/>	No <input type="checkbox"/> or N/A <input type="checkbox"/>
• Public liability insurance If yes, please indicate the value here £_____	Yes <input type="checkbox"/>	No <input type="checkbox"/> or N/A <input type="checkbox"/>
• Other insurance If yes, identify what here	Yes <input type="checkbox"/>	No <input type="checkbox"/> or N/A <input type="checkbox"/>
• Licence or permission for statutory activity If yes, please explain what here	Yes <input type="checkbox"/>	No <input type="checkbox"/> or N/A <input type="checkbox"/>

16. Does your project involve building or landscaping work?

No <input type="checkbox"/> If you answer 'no' go to Q.17		
Yes <input type="checkbox"/> if 'yes' tick the relevant boxes below.		
(i) Does the Parish or your delivery partner:		
Own the freehold of the land or building	No <input type="checkbox"/>	Yes <input type="checkbox"/>
or		
Hold a lease	No <input type="checkbox"/>	Yes <input type="checkbox"/>
(If yes, please include length of lease remaining _____)		
(ii) Is planning consent needed for your project?	No <input type="checkbox"/>	Yes <input type="checkbox"/>
If yes, tick one of the following:		
We have not yet applied for planning permission		<input type="checkbox"/>
* We are waiting for a decision on our planning application		<input type="checkbox"/>
* Planning permission has been granted		<input type="checkbox"/>
* Application number is _____		
(iii) Do you need the landowner's permission?	No <input type="checkbox"/>	Yes <input type="checkbox"/>
Permission obtained?	No <input type="checkbox"/>	Yes <input type="checkbox"/>

* Please refer to guidance notes

Section 3: PROJECT COSTS AND MANAGEMENT

Breakdown of the funding request

17. Please list all likely costs for your project or service.

You can either use the table below or attach a numbered separate sheet (but do not forget to address both Section A and B of this question). Remember, you will need to provide at least 3 quotes (in Section C) for any works to support this part of your application.

Section A: Project Budget Breakdown		Section B: How your project is funded	
Item or activity	Item/ activity cost	NHB contribution (this application)	Other contributions (£, from where, secured?)
<i>Example: Venue hire (use village hall 6x2.5hr meetings)</i>	£150	£50	£50 – Parish Council pledge £50 – application made to xx, decision awaited
TOTALS	£ _____	£ _____	£ _____

Please note, evidence of other sources of funding will aid your application.

Section C: Quotations for project (at least 3 are required)			
Name of Contractor/Supplier	Cost £	Works quoted for	Comments

Preferred Contractor/Supplier is

Why has this contractor/supplier been chosen?

18. If the table at Q17 shows a shortfall, please state where the rest will come from and if your project or service involves annually recurring costs, explain how you plan to meet these in the future?

Section 4: SIGNING-OFF YOUR APPLICATION

19. On behalf of the organisation identified at Q1, I declare that:

I am authorised to make this application. I have read, understood and completed the application in line with the guidance notes and criteria available. All the information and supporting documentation I have provided is truthful and accurate.

I declare that if an award is made, that the money will be used solely for the purposes outlined in this application and that proof of this will be returned to the Council for monitoring purposes. If details of the project or service change, I will notify the Council's contact officer.

Please note: To comply with the Data Protection Act 1998 we also require you to sign this document to give consent for your contact details to be stored on a secure database. The information will not be provided to any other organisation. The Council reports funding decisions annually and these are published on our website, successful Parishes' names, the grant amount awarded and a brief project description will be shown.

Important information for Parishes using a delivery partner: Under European 'State Aid' rules, contractors should not obtain more than a total of €200,000 (approximately £165,000) from Government Departments or local authorities over a 3-year period. I have read the above and confirm with our delivery partner that they have not received any recent state aid, as above (please tick).

Signed:

Date:

20. Please tick off the following checklist to confirm that your application is ready to submit:

(please tick)

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|---|--------------------------|
| I have answered all the relevant questions on the application form | <input type="checkbox"/> |
| I have taken a copy of the application for our reference | <input type="checkbox"/> |
| I have enclosed as appropriate: | |
| • A business plan or project plan if request for funding is £10,000 + | <input type="checkbox"/> |
| • Any evidence of support from local Consultation | <input type="checkbox"/> |
| • A copy of equalities, child protection or other relevant policies (see Q.15) | <input type="checkbox"/> |
| • Proof of freehold ownership or security of tenure (see Q16) | <input type="checkbox"/> |
| • Written permission of Landowner for the project etc (see Q16) | <input type="checkbox"/> |
| • At least 3 quotes for all works relating to the cost of the project (see Q17) | <input type="checkbox"/> |

Thank you for completing this form, please send it to us either electronically or by post (see details in 'How to complete the New Homes Bonus Application Form').