Administered by Officers at

**DISS TOWN COUNCIL**

Council Offices, 11-12 Market Hill,

Diss, Norfolk, IP22 4JZ.

Telephone and Fax: (01379) 643848

Email: towncouncil@diss.gov.uk

Website: www.diss.gov.uk

**Diss Surveyors Allotment Charity**

**Grant Scheme – Application Form**

Trustees are committed to ensuring the proper allocation of funds from the Diss Surveyors’ Allotment Charity in accordance with the charitable objects which are that ‘the Trust shall apply the income of the Charity as it thinks fit for any charitable purposes for the general benefit of the inhabitants of the Parish of Diss’.

*Applicants are advised to read the accompanying allocation of funds policy before completing this form.*

**Organisation’s / Individual’s Details**

|  |  |  |
| --- | --- | --- |
| 1. | Nature of grant requested from DSAC.  Is your organisation seeking a capital or revenue grant? | * Capital grant * Revenue grant |
| 2. | Name of Organisation |  |
| 3. | Organisation’s Address |  |
| 4. | Do we have an up-to-date copy of your organisations constitution or set of rules? | Yes  No  *If you selected no,*  **We will need a copy of your organisation’s constitution or set of rules. You may email a copy to** [**towncouncil@diss.gov.uk**](mailto:towncouncil@diss.gov.uk) **or post this to us.** |
| 5. | Name and contact details of applicant | Name:  Address:  Phone:  Email: |
| 6. | Position held in organisation |  |
| 7. | How long has this organisation been established? (if applicable) |  |
| 8. | How would you describe your organisation / the applicant(s)? (tick all boxes that apply) | * Voluntary organisation or individuals * Community/Residents’ group * Registered charity * Company limited by guarantee * Trust * Other – please state: |
| 9. | Is the organisation a charity registered with the Charity Commission for England and Wales | Yes  No  *If you selected yes,*  **What is your organisation’s charity number?** |
| 10. | Company registration number (if applicable) |  |
| 11. | How many members are involved in the running of the organisation?  *Please provide an organisational structure chart to show how your organisation is managed* |  |
| 12. | Does your organisation have a membership? | * Yes * No * N/A   *If you selected yes,*  **Please state current no. of members:**  **Annual subscription cost per member:** |
| 13. | Please give details of any other organisation or umbrella group to which your organisation is affiliated (if applicable) |  |
| 14*.* | Please tick if your organisation / group has:  *You do not have to provide any of these documents at the time of application, but they may be required before any grant funds are transferred.* | * A formal constitution * A child protection policy * A protocol for working with vulnerable adults * Public Liability insurance * A disability audit of its own premises * A risk assessment relating to the activity to which the grant relates. |
| 15. | Please describe the activities undertaken by your organisation, including location and frequency of meetings or activities if applicable. |  |
| 16. | Does your organisation have its own premises?  If yes, are they: | * Yes * No * N/A * Owned by the organisation * Rented * Other (please state) …………………… |
| 17. | Are there any restrictions on who can join the organisation? | Yes  No  *If you selected yes,*  **Please list the restrictions and why you have them?** |

**Project**

|  |  |  |
| --- | --- | --- |
| 18. | Please describe your project / activity: its aims and objectives, what it will deliver, what difference will it make and outline how it will benefit the people of Diss.  *Please continue on a separate sheet if necessary.* |  |
| 19. | When do you expect the project / activity to start? |  |
| 20. | When do you expect the project / activity to finish? |  |
| 21. | Is the grant for equipment or something else requiring ongoing maintenance? | * Yes * No |
| 22. | If yes, how will this ongoing maintenance be funded? |  |
| 23. | How long will the project actively involve residents of Diss? | * One day * Up to one week * Up to three months * 3-6 months * 6-12 months * More than one year |
| 24. | Which of the following categories of activity or groups apply to your grant application? | * Advice Services * Arts and Culture * Enhancing the environment of Diss * Older People * Sport and Recreation * Transport * Children and Young People * Women * Men * People with a disability * Black, minority or ethnic groups * LGBTQ + * People on low income * Lone parents |
| 25. | Approximately how many people will benefit from your grant?  *You will be asked to provide evidence in your end of year report.* | *Select one option*  1 - 9  10 - 19  20 - 29  30 - 49  50 - 99  100+ |

**Financials**

|  |  |  |
| --- | --- | --- |
| 26. | Grant amount requested | £ |
| 27. | Do you intend to secure match funding for this project? | Yes  No  *If you selected yes*, please list all sources and amounts: |
| 28. | Is your organisation making any non-financial contributions to the project/activity? | Yes  No  *If you selected yes, p*lease list all non-financial contributions to the project/activity: |
| 29. | Do your current cash reserves exceed the amount of grant you are asking for? | Yes  No  *If you selected yes,*  Please explain why you are not using your own funds. |
| 30. | In addition to the above, the following will be required of grant applications. | * The organisation’s / group’s Bank or Building Society account details * Evidence of efforts to generate income from other sources * Copies of the organisation’s latest audited or independently verified accounts, together with a budget / business plan for the period covered by the grant applied for * A copy of your group’s most recent bank account statement. *Please provide copies for all accounts you hold. This account must be in the name of your group, and at least two unrelated people must sign each cheque or withdrawal.* |

**Outcomes**

|  |  |  |
| --- | --- | --- |
| 32. | What are you hoping to achieve from your project / activity and what robust methods will you use to measure success? |  |
| 33. | How will you measure the outcomes to ensure your project / activity is successful?  *Please ensure your outcomes are specific, measurable, achievable, realistic and timely.*  *If not included above, please also provide:* | * A list of objectives alongside methods of measuring the achievement of those objectives. |

*Please add any additional supporting information you would like considered here.*

|  |
| --- |
|  |

This form should be returned to The Town Clerk, Diss Town Council, Council Offices, 11-12 Market Hill, Diss, Norfolk, IP22 4JZ, or to [towncouncil@diss,gov.uk](mailto:towncouncil@diss,gov.uk).

**Terms and Conditions**

Before you submit your application, you must read and agree the following Terms and Conditions of Grant. Two signatories for the group should then sign the declaration, which confirms that the organisation understands and agrees to the Terms and Conditions.

Within the Terms and Conditions ‘we’ and ‘our’ refers to the applicant organisation. ‘Diss Surveyors Allotment Charity’ refers to the service providing the resources for which you are applying.

**The Grant**

1. We will use the Grant as described in our application form. Any changes must be agreed in writing and in advance by the Diss Surveyors Allotment Charity.
2. We agree to return any Grant if the project cannot proceed.
3. We will inform the Diss Surveyors Allotments Charity immediately in writing of anything that significantly delays, threatens, or makes it unlikely that the Grant will either not be used within the agreed period or not be used for the purpose described in the application.
4. We are aware that any equipment which has been awarded to us is under the charge of our organisation and must be regularly maintained and insured to its full replacement value and kept in a secure premise.
5. We understand that the amount and schedule of payments will be indicated in the formal Grant offer, and that no expenditure should be incurred until the Grant offer has been received, signed and returned to the Diss Surveyors Allotment Charity.
6. We agree that in any publicity or public presentation about the funding, we must include an indication that the project / activity was supported by the Diss Surveyors Allotment Charity.

**The Organisation**

1. We will advise the Diss Surveyors Allotment Charity in writing of any changes to our bank or building society bank account.
2. We will keep all financial records and accounts, including receipts for items bought with the Grant for two years from the completion of the project for which funding has been awarded. We understand that this does not release us from our legal responsibility to keep records for longer periods.
3. We will make all financial records available for inspection by the Diss Surveyors Allotment Charity as requested. We understand that any documentation supplied will not be returned.
4. We agree to meet all legislation regulating the way that we operate, the work that we carry out, the staff that we employ and the goods that we buy, particularly, but not exclusively covering the areas of Equal Opportunities, Data Protection, Employment and Health & Safety.
5. If appropriate to the Grant, we agree to comply with guidance as advised by Council Officers.
6. We understand that the Diss Surveyors Allotment Charity will make public information about our Grant, and that if requested to do so we must prepare and present a short report to Trustees following the completion of the grant funded activity.
7. If appropriate, we will ensure that adequate Employers Liability and Property Insurance is in place. We will produce these documents to the Diss Surveyors Allotment Charity on request.
8. We understand that the Diss Surveyors Allotment Charity will not accept liability or be liable for any damages or injuries associated with projects for which the Council has provided equipment or a Grant.

**The Diss Surveyors Allotment Charity may withhold a Grant or ask for repayment, in whole or in part for the following reasons:**

1. If we fail to keep to these conditions in any way.
2. If members of our governing body, volunteers or staff act or supply information at any time during the application process or project which is dishonest, significantly incorrect or misleading.
3. If, for any reason, the organisation ceases to exist, any unused Grant will be returned to the Diss Surveyors Allotment Charity. We will return any equipment or other assets bought with the Grant to Diss Surveyors Allotment Charity or, with prior agreement, transfer the equipment or assets to another organisation with similar objectives.
4. If we sell any asset purchased with a Grant, we will notify the Diss Surveyors Allotment Charity in writing and return an agreed proportion of the sale proceeds agreed with Diss Surveyors Allotment Charity.
5. If any equipment or asset is stolen, lost or damaged, we will replace it or return monies obtained from insurance to the Diss Surveyors Allotment Charity.

**Declaration by Main Contact**

I confirm that the information I have given on this application form is accurate and complete and that I have authorisation to apply for a Grant on behalf of the organisation.

I acknowledge that if I give misleading or inaccurate statements on behalf of the group or organisation, we may not receive any Grant, or it may be withdrawn and must be refunded to the Diss Surveyors Allotment Charity.

I confirm that I have read and accept the Terms and Conditions of the Grant.

**PLEASE PRINT**

|  |  |
| --- | --- |
| **Title**  **(Mr, Mrs, Ms, Miss):** |  |
| **First name:** |  |
| **Surname:** |  |
| **Signature:** |  |
| **Date:** |  |
| **Position within the organisation:** |  |

*Please Note: This must be completed by the same person as named in Question 5 on the application form*.

**Co-signed by another member of your organisation:**

|  |  |
| --- | --- |
| **Title**  **(Mr, Mrs, Ms, Miss):** |  |
| **First name:** |  |
| **Surname:** |  |
| **Signature:** |  |
| **Date:** |  |
| **Home address:** |  |
| **Phone number (daytime):** |  |
| **Email address:** |  |
| **Position within the organisation:** |  |

*Please Note: This must be a different person to the one named above.*

**Privacy Notice**

The Diss Surveyors Allotment Charity takes your privacy seriously and will only use your information in relation to your grant application*.*

**Checklist**

**Before sending us your application, please check that you have done the following:**

|  |  |
| --- | --- |
|  | *Please tick* |
| Answered all the applicable questions on the application form |  |
| The main contact from Question 5 has signed the Declaration |  |
| The Declaration has been co-signed by another member of your organisation |  |
| Included the following:   * A copy of the constitution or set of rules that your group has adopted. Your group must have this document to receive a grant from us. * A dated copy of your most recent yearly accounts verified by an independent person. * A projected statement of income and spending for the next 12 months. * A copy of your group’s most recent bank account statement.   Or   * A copy of the pages in your passbooks showing your group’s name, account number and current balance, stamped and signed by your building society.   Or   * If you are a new group which has only just set up a bank account, a signed letter from your bank or building society on their headed paper. This letter must show your account name, number and sort code.   **If your project / activity includes work on a building or land, please also provide:**   * Copies of any plans, maps or drawings etc. related to your application for work on a building or land * Copy of planning permission if appropriate * Three quotes for any work to be carried out or items to be purchased over the value of £1,000 * A copy of your Child Protection Policy/Vulnerable Adults Policy where appropriate * A copy of contents / employer’s liability / public liability insurance policy where appropriate * Confirmation that other statutory/licensing consents have been received (where appropriate) |  |
| Copied this application to keep for reference |  |

**PLEASE NOTE THAT APPLICATIONS CANNOT BE PROCESSED UNTIL ALL OF THE NECESSARY DOCUMENTS ARE RECEIVED BY THE DISS SURVEYORS’ ALLOTMENT CHARITY.**