



Saltash Town Council



Grant Application Form

APPLYING FOR:
(Tick one box)

Community Chest Grant

Festival Fund Grant

DATE APPLICATION SUBMITTED:

25 January 2021

Contact Name:	
Position:	
Organisation:	Rotary Club of Saltash
Contact Address:	
Telephone Number:	
E-mail:	
Status of Organization:	Service Organisation with registered charity status
Charity/Company number (if applicable)	Charity No: 284149 Company No:
What geographical area does your organization cover?	Saltash and surrounding area

How long has your organization been in existence?	Saltash Club Chartered 1959
--	-----------------------------

Please note that it may be asked to attend a meeting of the Policy and Resources Committee to answer questions on your application.

1. Organisation Background

	Date Applied	Project	Amount Applied for	Successful Y/N
Have you applied for a grant from Saltash Town Council within the last <u>5 Years</u>? (Please list – continue on a separate sheet if necessary)	March 2017	Refurbishment of Christmas Sleigh	£500	Yes
Please list the aims and objectives of your organization	Please see article 5 page 2 of the constitution document.			

What are the main activities of your organization?	Service to the community locally, nationally and internationally. We support Mayfair, Saltash Regatta, events at Waterside, Saltash Schools with literacy, public speaking and holidays for children and the Christmas Festival with our sleigh.
---	---

	Yes / No or N/A
Are you part of a religious group?	No
If application is for a Church – is it for anything other than a parish clock, Community Hall (used by all within the community) or environmental purposes?	No
If application is for a School – Is, it for anything other than environmental purposes or a project that does not benefit the wider community and is not in addition to statutory services?	No
If application is from an education, health or social service establishment – do you work in partnership with other groups?	No
If application is from an education, health or social service establishment – is project in addition to statutory services?	No

2. Your project

Project	Start Date	1st / March /2021
	Finish Date	31 / March /2022
	Total Cost	£ 2100
	Grant Applied For	£ 1000

Project title:	Community Service Project to Renovate and re-use the redundant Telephone Kiosk at Saltash Railway Station as a defibrillator point for public use.
-----------------------	---

Description of project (please continue on a separate sheet if necessary):	Please see separate project description document
Where will the project/activity take place?	Telephone Kiosk adjacent to the newly restored Saltash Railway Station.

Who will benefit from the project? (What groups will benefit and approximately how many people will benefit in total)	The Saltash Community particularly those using or in the vicinity of the Railway Station.
What evidence do you have that this project is required? (This might be survey work or statistical evidence)	The K6 kiosk is in very poor condition and redundant and requires restoration and a new use.
What support have you received for this project? (Please tell us about any expressions of support you have received from outside your organization Consultation with Community)	A number of references to the need for renovation on facebook groups and some local councilors.

<p>How will the project be managed and how will you measure its success?</p>	<p>The project will be managed by the Saltash Rotary Club and we have previous experience of defibrillator provision in Fore Street and Waterside. The plan milestone phases are shown in the project description document.</p>
<p>Please give the timescale and key milestones for your project, including a start date and finish date.</p>	<p>Milestone phases are shown in the project description. Timescales are generous to try and take account of Covid 19 restrictions. Phase 1: March 2021 – July 2021 Phase 2 August 2021 – September 2021 Phase 3 October 2021 – March 2022. These dates may be shortened if Covid restrictions allow.</p>
<p>What arrangements do you have in place to ensure safeguarding of children and /or young people and/or vulnerable people (applicable only if your project involves working with this client group)</p>	<p>N/A</p>

3. How you will pay for your project.

<p>What will the money be spent on? (Provide a full breakdown of project cost(s) identifying what cost(s) this grant would be spent on)</p>	<p>Costs are shown in the project description document.</p>
<p>How will you promote STC once application and project are complete?</p>	<p>We propose that logos are shown on the upper windows of both the Town Council and Rotary and that a notice is also displayed in the kiosk.</p>

Saltash Town Council considers Match Funding is extremely important. Please list any applications you have made for funding from other organisations in the table below:

Organization	Contribution Sought (£)	Applied (please tick as appropriate)	Granted (please tick as appropriate)
Rotary International Foundation District Grant	£500	3	3

Please confirm the bank account your project is using is in the project's name/organization name	Account Name Confirmed
---	------------------------

4. Further information enclosed Checklist.

	Enclosed (please tick)
A copy of your organization's most recent bank statements (mandatory)	3
Copies of all <u>relevant</u> Employer's, Building & Public Liability Insurance Certificates & Title Deeds if appropriate (mandatory)	3

A letter head showing the organization's address and contact details	3
A copy of your constitution and articles of association (or similar documents if the above do not exist, showing the organization's status)	3
A copy of your organization's latest set of accounting statements (if any exist)	3
Copies of any letters of support for your project	
If your organization has previously received a grant from STC please include a brief report and evidence of how you promoted the contribution from the Council	Through the local press and social media.
Other (please list)	

If any of the above documents have not been enclosed, please give reasons why in the box below:

We have not sought letters of support but a number of comments on facebook community groups have been supportive.

5. Declaration by the applicant

I/we declare that, to the best of my/our belief, the information given on this application form and in any enclosed supporting document is correct.

I/we declare that, I/we have read the Town Council's Grant Policy and believe to the best of our knowledge, that we meet the criteria set out by the Policy.

I/we confirm that a risk assessment will be completed prior to an event granted funding by the Town Council.

I/we accept the following:

Committee Date	
Decision/Minute number	
Amount awarded	
Application refused by P&R Chairman or refused by Committee	
Appeal notice issued	
Appeal received	
Approved for Committee	
Decision/Minute number	

