

# The Community Chest Application Form 2013 - 2014

The  
Community  
Chest



## About Your Group

1. Name of organisation:
2. Name of main contact:
3. Address of main contact:
4. Telephone number:
5. E-mail:

**(Please print email address clearly)**

5. West Lindsey District Council Area **(please mark X in box)**

Trent Area	<input type="checkbox"/>	Gainsborough Area	<input type="checkbox"/>	Fosdyke Area	<input type="checkbox"/>
Caistor Area	<input type="checkbox"/>	Market Rasen Area	<input type="checkbox"/>	Witham Area	<input type="checkbox"/>

6. Which of the following best describes your group? **(please mark x in box)**

Parish Council	<input type="checkbox"/>	Registered Charity	<input type="checkbox"/>	Community/Voluntary Group	<input type="checkbox"/>
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Other (please specify)

## About Your Project

Is this a general community project (£500 maximum)

Development of Community Led Plan (£1000 maximum)

Actions arising from a completed Community Led Plan (£1000 maximum)

7. Project title:
8. Project location:

9. Which of the following West Lindsey District Council corporate priorities will your project contribute to? To view the corporate plan click the link below:

<http://www.west-lindsey.gov.uk/searchResults.aspx?qsearch=1&keywords=corporate+plan&x=44&y=18>

**(Please mark x in box)**

An accessible and connected district where all have the best opportunities in life to help themselves and others	
A green district where people want to live and visit	
A prosperous and enterprising district	
Active, healthy and safe citizens and communities	

**10a. Please describe the project** you wish to be funded (include what activities will be undertaken, the start time and length of the project and who will manage the project). Please use the box below and continue on an additional sheet if required.


**10b.**

**Project Need**

Please tell us how you know there is a need for the project (e.g. open meetings, feedback sheets, questionnaires, letters of support, photographs).


11. How do you know your project will benefit local people?


12. How will volunteers be involved in the project?


13. Finance/Project Costs

Items/Activity	£	CAV Fund Requested:	£
		Other Funds Secured:	
		eg: Awards For All	1,000.00
<b>Total Cost</b>	£	<b>Total Income</b>	£

NB: Totals in the Income and Expenditure Columns should be the same.

14. Volunteer time to be spent on the project:

No. of Volunteers:		No. of Hours (Cost @ £12.00 per hour)	
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15. Please enclose a copy of the following with your application form:

(please mark x in the box to show your documents are included with this application)

Constitution		Minimum 2 Quotes For Items Over £50	
Latest Accounts		Last Bank Statement	

16. If your project requires planning permission is this: (please mark x in box)

In place		Applied for		If applied for when will you hear?	
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All details will be held in accordance with the Data Protection Act of 1998 for the purpose of this project and Community Lincs work. If you do not wish to receive regular updates from us please tick the box:

**I confirm that the information provided is true and accurate.**

Signed:		Date:	
Position in Organisation:			

Please return this form to:

Community Chest

Community Lincs

The Old Mart

Church Lane

SLEAFORD

NG34 7DF

Telephone: 01529 301951/30246

Email: [communitychest@communitylincs.com](mailto:communitychest@communitylincs.com)

Translation: This form is available in other formats on request.

<b>Office use only</b>			
JS	<input type="checkbox"/>	JC	<input type="checkbox"/>