

WALMER TOWN COUNCIL

62 The Strand, Walmer, Kent CT14 7DP Tel: 01304 362363

Web site: www.walmercouncil.co.uk

Nature and Biodiversity Grant Application

SECTION 1: Please provide contact details.

This should be someone who will be able to answer any questions we may have about this application. It must be a current member of your group/organisation.

Organisation/Group name	
Name of main contact	
Position/Role	
Contact Address	
Telephone	
Email	
Section 2: Tell us What is the title of your	about your project project?
Where will your project	take place?

Give an overview of your project (max	Annam ood Horasj.
words)	to the biodiversity of Walmer (max.150 How did you do this and what did they say? Do you have
low will your project benefit the envi	ronment of Walmer? (150 words)
	cular people or places? How many people outside your

How will you measure your project achievements? (100 Words) How will you know whether your project has worked? What records will you be able to keep e.g. surveys; photographs; videos; receipts; invoices; timesheets showing volunteer hours contributed.				
Does your project require any permissions?	<u></u>			
□ NO				
☐ YES (copies must be submitted with this form or provide a pla	nning application reference number)			
Section 3: Tell us about your project costs				
What are the total project costs?				
Please complete this table giving all the costs involved in your project as accurately as possible.				
All costs must include VAT. (Please contact us if there is not enough space provided here)				
Description of project cost	Amount (please show pounds and pence £0.00)			
TOTAL Project Cost				

How are	e you planning to pay for these	project c	osts?	
	on of the funding sources for project	Amount (please show pounds and pence £0.00)		Is this resource Secured? Otherwise please provide a date when you will know
Nature	and Biodiversity Grant			NO – TBC
,	his should be the same as, or more than, provided in the table above)			
	rill the Nature and Biodiversity (be specific.	Grant be ι	ised to buy or	pay for?
	Description Item/s		Expected cost of item/s (please show pounds and pence £0.00)	
TOTAL				
Section	n 4: Tell us about your Org	anisation		
What ty	pe of group/organisation are ye			
Please tid	ck all that apply			
☐ Re	egistered Charity. Please provide the Ch	arity Number	here:-	
☐ Cr	Charitable Incorporated Organisation (CIO)			
□ co	Community Interest Company (CIC)			
□ co	Co-operative/Industrial & Provident Society (IPS)			
☐ Sc	ocial Enterprise			
□ Vo	oluntary/Community Group			
□ Sr	oorts Club/Group			

		Vice c	hair			
		Treas	urer			
		Secre	tary			
		Chair				
Name			on/Role	Date Elected (to		Preferred Contact details (either phone or email)
Plea	se tell us al	out v	our Mana	gement Comr	nittee	
If so w	vhat:					
	Yes		lo			
Does	s your grou	p hav	e any oth	er Bank accou	ınts in its	name?
Name	of signatory 4					
Name	of signatory 3					
Name	of signatory 2					
Name	of signatory 1					
Pleas	e provide deta	ils of at	least 2 curr	ent signatories fo	r this bank	account
Sort C	Code					
Accou	ınt Number					
Accou	ınt Name					
Name	of Bank					
Plea		the ba	ank accou	nt details for	your gro	up
Ш	Other. Pleas	e enter	the details he	ere:-		
	Part of [or related to] a larger organisation, Federation or National Charity. Please enter the details of this here					
	Church/Faith group					
	School related e.g. PFTA					
	Youth Club/G	roup				

Type of financial reserve	Total value (£) at time of application
Restricted Funds (funds that may sit in the main bank account of the organisation but that can only be used for specified purposes. You may be asked to provide evidence of restriction on these funds such as formal minutes of meetings where decisions were taken to restrict them and/or notes of the annual accounts if your organisation has produces them)	
Unrestricted Funds	
TOTAL (sum of the above)	

Section 5: The Declaration & Data Protection Statement

I he	I)ec	laration	١

	tick the boxes to confirm you have read, understood and agree to the following statements.
Ш	Both you and the Management Team/Committee of your organisation have read and understood the Eligibility Crieria for the Nature and Diversity Grant and have also read, understood and agree to the Terms and Conditions that apply to the Nature and Diversity Grant.
	You are authorised to submit this application on behalf of the group/organisation who will receive any grant awarded.
	You confirm that all of the information you have provided in relation to this application form is true and correct to the best of your knowledge.
	That Walmer Town Council have permission to contact other grant providers about the project details contained in your application form, if required.
	1 or 2 representitives from your group will attend the meeting at which it will be discussed. Without representation your application may not be considered.
	f bank statement less than three months old f your constitution or terms of reference
Signed	:
Dated:	
GDPR d	lisclaimer: http://www.walmercouncil.co.uk/Sites/2732/_UserFiles/Files/Privacy-notice-genera.ndf