SPC- Grant Application Form

1	Applicant's details	Name:		
		Name of organisation (if applicable):		
		Address:		
		Postcode:		
		Telephone number:		
		Email:		
2	Please describe your organisation and project (if applicable)			
3	If your application is for a specific project, please provide estimated cost of project and supporting			
evidence:				
4	Amount of			
	grant			
	requested:			

5	How does your organisation/project meet the objectives of	Slaley Parish Council?
0	Who will benefit from your organisation/project? Please give grant and how it will benefit the residents of Slaley Parish	ve details of who will benefit from the
7a	Have you previously applied to the Parish Council for grant aid?	YES/NO
7b	Have you received a grant from the Parish Council in the last two years?	YES/NO
7c	If yes, please provide details	
8a	Have any grants from alternative sources been applied for?	YES/NO
8b	If yes, please give details.	

9	Please state any further information in support of your application				
	Constant and the second	will be a sid by Doub to sefer			
	Successful grants will be paid by Bank transfer.				
10	Please clearly state your bank details.	Name of bank: Name on the account:			
		Sort Code:			
		Bank Acc. Number:			
sole dis	cretion of the Cou	ncil and that grants may be awarde			
Signatu	ire	Name of si	gnatory		
For and	l on behalf of (nam	ne of applicant organisation, if appl	icable)		
Date					
Evidend Evidend Proof o	ce of other grants of bank account	this application: penditure and costing pobtained for the above purpose ted – please detail below.	Yes/No Yes/No Yes/No		