Breckland Section 106 Funding

PROJECT

Please either type or write clearly in black ink				
A. CONTACT DETAILS				
Name of Applicant Organisation				
Main Contact for this Organisation This must be someone who knows about the project and can be easily contacted				
Name:				
Address:				
Telephone:				
Day:				
Evening:				
E-mail:				
What kind of a group are you? (eg. Parish Council, Voluntary Group)				
Who will manage and monitor the project?				
B. PROJECT DETAILS				
1. Title of Project				

2. Please describe your Project	
Please continue on a separate sheet if needed (No more than 2 sides of A4)	

3. How have you consulted with local people about the project? (i.e. Village Appraisal results, local consultation events with young people, letters of support etc). Please attach any supporting information for this question.
4. What are groups in this project intended for 2. (Dlanca actionate property)
4. What age groups is this project intended for? (Please estimate numbers)
0-5
6-10
11-16 17+
5. Project Outcomes. Briefly describe what difference your project will make by listing up to
five proposed outcomes 1.
2.
3.
4.
5.

6. Do you need planning permission for your project? (Please tick) Yes No			
(If yes, please state the stage you are at in terms of applying for planning permission)			
Co Where will your project be leasted? Disease provide a site plan as an engandial			
6a. Where will your project be located? Please provide a site plan as an appendix!			
6h Da vay awallages the land? Plages state the terms that the land is available to you as			
6b. Do you own/lease the land? Please state the terms that the land is available to you, e.g.			
freehold, leasehold etc			
6c. How will you fund the ongoing costs relating to your project once a grant has been			
made? Please list your principal costs e.g. inspections/Insurance/safety checks/grounds			
maintenance/replacement equipment etc			
панкенансе/геріасеттетік еңиірттетік екс			
6d. Have you consulted the Police Architectural Liaison Officer for advice? Yes \(\scale \) No \(\scale \)			
(Please send us a copy of the report. For contact details please see the guidance notes)			

C. FINANCE	
Is the recipient organisation able to re-claim VAT?	Yes No
Expenditure: Give details of the costs of your proje It is important that you give an accurate estimate based the quote received.	
Item	Amount(£)
Project Total	£
Please tell us if you have any additional funding to p	out towards this project
Organisation	Amount(£)
	, ,
T (1.4.1 PM	
Total Additional Funding	£
Total funding requested £	
I declare that to the best of my knowledge and belief, form and in any supporting material is correct. I unde information at any stage of the application process. It notes.	rstand that you may ask for additional
Project title:	
Signature:	
Name of signatory:	
Position of signatory:	

For Office Use Only:	Date received	Grant £
For Office Use Only:	Date received	Grant£

Please return completed form: Charlotte Brennan

Breckland Council Elizabeth House Walpole Loke Dereham Norfolk NR19 1EE