



**CREICH COMMUNITY COUNCIL  
COIRE NA CLOICHE WINDFARM COMMUNITY BENEFIT**

# APPLICATION FORM

*Please read the Coire na Cloiche guidelines before completing this form.*

Full Name of organisation:

Name of project:

Total cost of project:

Amount applied for:

## CONTACT FOR CORRESPONDENCE

*(Please give name, address, phone and e-mail address)*

Name:

Address:

Post code:

Tel No:

Email:

## YOUR ORGANISATION'S BANK DETAILS

Bank or Building Society Name:

Account Name:

Account Number:

Sort Code:

## WHAT DOES YOUR ORGANISATION DO?

**PLEASE GIVE A BRIEF DESCRIPTION OF THE PROJECT:**

**PLEASE ITEMISE THE MAIN ELEMENTS OF THE PROJECT AND THEIR COST:**

**HOW MUCH WILL YOUR ORGANISATION CONTRIBUTE TO THE COST OF THE PROJECT?**

**OTHER FUNDING APPLIED FOR**

Amount

Confirmed Yes/No

## EQUAL OPPORTUNITIES

*Give details of any barriers vulnerable groups may face participating in the project and explain how you to plan to tackle these.*

Does your group work with children or vulnerable adults? YES NO

If yes, does your group has an up-to-date children protection policy or equivalent? YES NO

### STATEMENT:

To the best of my knowledge the information on this form gives a true and accurate account of this organisation's work and needs. I confirm I am authorised to complete this application and have read and agreed to the under noted terms and conditions:

1. The funding is not for any of the following purposes:

political, religious, entertainment or hospitality purposes

any purpose adverse to the developer, Rock by Sea.

to finance or replace any service that The Highland Council is obliged to provide

2. I acknowledge the right of the Community Councils to advertise details of the projects and applicants receiving support from the Fund

Signature:

Position in Organisation:

Date (dd/mm/yyyy):

The form should be returned to: The Secretary of the Community Council at  
secretary@creichcommunitycouncil.org.uk