Before completing this form, please read the Community Fund Guidelines document. All applicants should complete Sections 1, 2, 3, 7, 8 and 9 If your application is for funding less than £1,000 please complete Section 4 (Page 10) If your application is for funding between £1,000-10,000 please complete Section 5 (Page 12) If your application is for funding in excess of £10,000 please complete Section 6 (Page 15)

Thankyou, we hope you are successful.

SECTION 1 - YOUR ORGANISATION		
Name of organisation		
Address		Please provide the address for correspondance
Applicant contact details Name		Your contact must be someone who can talk about
Position in organisation		the project and funding needs in detail.
Address (if different from above)		
Tel (day)	Tel (evening)	
Email		
Geographic area covered by organisation		The project for which you are seeking support must fall within our designated areas - see our guidelines

How many people are involved in your organisation? Members Users Paid Staff Management Committee Others, please explain	Please give numbers
Are you a registered charity? Yes No	You do not need to be a charity to apply but you will need to enclose your constitution or a simple set of signed rules.
Is your organisation part of a larger group? Yes No	
What is the purpose of your organisation?	In this section, you should detail why your group was set up, what the aims and objectives are and who the benefciaries are for the work you carry out.

SECTION 2 - YOUR PROJECT	
Title of the project	
Location of the project	Does the project have a specific location?
Description of the project	Give details of the project and what you want it to achieve
Which of the following criteria do you believe are met, and why? Please refer to the more detailed explanations of the criteria in the guidelines and the tick the relevant criteria	
Improving access for children and young people to activities and services	

Carbon reduction to tackle climate change

Improving access for vulnerable people to services and facilities

Providing recreation, care and companionship for elderly people

Regenerating the community

Improving or maintaining community buildings

Providing self-help services in the community

Improving community and/or wildlife environment

Improving access to education and skills development

Improving the health and well-being of the community	
Celebrating, protecting or preserving local heritage	
Promoting local sustainable development	
Other place coeff.	
Other, please specify	
How will you judge the success of the project?	If you have benchmarks/ targets please tell us about
	them. Be realistic as we shall use them in monitoring the project

If your project involves land or buildings that your organisation does not own, who are the owners and do you have their permission?	Include here details of any leasing arrangement or if you intend to buy property
Who will carry out the work?	Will it involve volunteers or a contractor?
How will the project be managed?	Please state how it will be managed in both the short and long term

Will it be fully accessible to the public and how many people do you expect to use it in a typical year?	Please give your best estimate of usage
What is the timescale for the project?	When will it start and finish and are there any key landmarks along the way?
Are you working in partnership on this project with any other groups? If so, please identify them	Include the names of any community, voluntary or statutory organisations that you are working with or are supporting you

SECTION 3 - FUNDING	
What is the total cost of the project including VAT	
What funding are you seeking from the Tullo and Twinshiels Community Fund?	
Is your organisation VAT registered?	
If so, what is the recoverable VAT on the amount you are seeking?	
What other funding exists or is being sought?	Do you have already funds towards the project and are you applying elsewhere?
Will a grant from us assist in triggering match funding from elsewhere?	Match funding is not a condition of a grant from us but may assist your case
Will the funding allow the project to occur within the calendar year? Yes	No

Will there be any longer term funding requirements for this project to sustain it into the future? If so are they in place?	We need to be sure that you have considered running costs
Does your organisation have a bank account? Yes No	
How many account signatories are required?	
If funds are awarded, to whom should the cheque be made payable?	
To what address should the cheque be sent?	This could be your organisation or the contractor. Cheques cannot be made payable to individuals



SECTION 4 - BAND ONE APPLICATIONS, LESS THAN £1,000

If you require additional space please attach additional pages to this application and state the question numbers clearly.

Please outline why you think there is a need for this project in the community

Please describe the benefits the project will provide to the community

Please outline the project timescale and the activities that will be undertaken

Please outline the how the funds requested will be allocated



SECTION 5 - BAND TWO APPLICATIONS £1,000 -10,000

If you require additional space please attach additional pages to this application and state the question numbers clearly.

Please outline why you think there is a need for this project in the community. Provide details of research conducted with those in the community who will use the facility of service.

Please describe the benefits the project will provide to the community. Provide details of research conducted with those in the community who will use the facility or service.

Please provide a detailed breakdown of the tasks to be completed throughout the funding year.

Please provide a breakdown of the requested funding, what it will be spent on, and any associated quotes from suppliers/contractors.

SECTION 6 - BAND THREE APPLICATIONS, MORE THAN £10,000

Supporting documents are required for this section

Please provide a two page supporting document outlining why you think there is a need for the project within the community. Back up your statement with research conducted in the community with those who will use the facility or service.

Please provide a two page supporting document outlining the benefits the project will bring to the community. Back up your statement with research conducted in the community with those who will use the facility or service.

Please provide a detailed work breakdown structure outlining the tasks, durations, and costs associated with all activities to be carried out within the funding year. Supporting information from contractors would be helpful.

Please provide a detailed budget breakdown, outlining the costs associated with all of the tasks to be carried out within the funding year. Please provide supporting information and competitive quotes from multiple suppliers/contractors.

Please note that applicants requesting band three funding may be required to attend a meeting to present details of their project to the panel of the Tullo and Twinshiels Wind Farms Community Fund.

SECTION 7	- DECLARATION	
signing this app special condition Tullo and Twinsł	ed to submit this application on behalf of the organisation and certify tha lication form, we agree to abide by the terms and conditions included ir ns within the letter of award. We understand that we will be required to niels Community Fund with receipts and reports on the progress of the ecord the information in this form electronically. We also give permission	n the fund guidelines and any additional monitor expenditure and to provide the project as required. We give permission
Signature 1	Name	Date
Signature 2	Name	Date

SECTION 6 - INDEPENDENT REFERENCE		
Name		This section should be
Occupation		completed by someone who knows your
Contact address		organisation and can support your application. It cannot be a member of your
Daytime telephone		management committee, a volunteer or user of your group.
I can confirm that I know the applicant organisation. I have funding. I support the proposal and am happy to be contacte		or your group.
Signature	Date	
Signature	Date	

SECTION 9 - CHECKLIST

Please ensure that you have included the following information as it applies to your project. Failure to do so may delay or jeopardise your application. Please tick the boxes or leave blank as appropriate.

Supporting information relating to Section 4, 5 or 6 as applies to this application
Completed form signed by two people
Copy of your constitution or rules signed by each member if the management committee
If your organisation relates to children or vulnerable people, copies of your Child Protection Policy and Vulnerable Persons Policy
Location plan for the project
Photographs of the site
Detailed plans
Sketch of the work proposed
Evidence of the landowner's permission
Planning permission approval
Copy of your organisation's most recent accounts if you have been running for over one year
Most recent set of accounts

WHERE TO SEND YOUR FORM

Please return your completed application to;

tullo.twinshiels@gmail.com or by post to Mearns Area Partnership PO Box 7197 Montrose DD10 1AT