

DISCRETIONARY GRANT APPLICATION (Grants over £500)

By submitting this application you agree to the current Guidelines and Terms for Discretionary Grants from Chichester City Council

Name of organisation:		
Name of person making the application :		
Position in the organisation:		
Address:		
Telephone number:		
Email :		
Purpose of organisation:		
Number of members:		
Date founded:		
Is the organisation a registered charity	? YES/NO	
	If YES, please give registration number:	
SIGNED AND DATED: By signing this application I confirm acceptors Grants Guidelines and Terms	ptance of the Chichester City Council Discretionary	
Estimated total cost of: proposal/project		
Amount of Grant requested:		
Have you applied for any other Discretionary Grants from Chichester City Council in the previous 3 financial years? If yes, please give brief details:		

Why has the Grant has been applied for – please give as much information as possible (continue on another sheet if required):		

Have you applied for any other Grants for this project? If yes, please give brief details:		
	U HAVE APPLIED FOR FUNDING ELSEWHERE FOR THIS PROJECT, what is the ion of this application to Chichester City Council (please tick as appropriate):	
	A speculative application in the event other applications are unsuccessful	
	Match funding with other Grants as part of the overall project cost	
	sentation to Chichester City Council's Community Affairs Committee in support of pplication will be required at their meeting in April.	
	person giving the presentation is different to the person completing this cation, please give details below:	
	of person making esentation:	
Positi	on in the organisation:	
Addre	ess:	
Talan	hone number:	
ГСІСР		
Email	<u> </u>	
	e ensure that you have completed all the sections above and the following nents are attached to this Discretionary Grant Application:	
	A simple Business Plan outlining why a Grant should be awarded	
	A copy of the latest Audited Accounts or an Income & Expenditure Sheet for the last complete financial year	
	A copy of your Events Insurance Policy if the Grant requested is for a specific event	
	Evidence of quotes received in support of the project cost projections	
Please	e return the Discretionary Grant Application Form and associated documents to:	
	n Bowen - Member Services Support Officer ester City Council, The Council House, North Street, Chichester. PO19 1LQ	
g.bow	en@chichestercity.gov.uk	

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