LAND OF LEAD AND SILVER COMMUNITY GRANTS SCHEME

Community Grants Application Form

Please read the accompanying guidance before completing this application form. Answer all questions and enclose all documents requested.

(If you type into this form the text boxes will expand).

If you need any assistance in completing this form, please contact the Land of Lead and Silver Interpretation and Engagement Officer on 01388 528801 or rebecca@northpennines.org.uk.

SECTION 1. ABOUT YOU/YOUR ORGANISATION

1a. Name and address of your organisation (if applying as an individual go to question 1b)

- Give your official or registered address.
- The name should be the same as on your constitution.

 Organisation's website (if it has one):

 1b. Details of main contact person
 This must be the person who can talk about your application in detail.

 Name:

 Position:

 Address (if different from Q1a):

 Full postcode:

 Daytime phone number (include area code):



Email address:



1c. Legal status of your group (org	ianisations only)			
When was your organisation formed	?			
How would you describe your grou Parish Council; registered charity;		ary/communit	y group; so	chool;
Registered Charity Number (if applicable):	Registered Number (if a			
1d. Describe your organisation's m count guidance 50-75 words	nain purpose and regular a	ectivities (<i>orgai</i>	nisations o	only) – word
1e. Banking Arrangements (organi	isations only)			
Does your organisation have a bank a	account?	Yes		No
Does this bank account require the s people, living at separate addresses		Yes		No
1f. Are you VAT registered?	Yes No	0		
If yes, give your registration number:				
Please remember that if you are re recoverable VAT.	gistered for VAT, you can	not apply for th	ne cost of	
1g. Public Liability Insurance				
Do you/your organisation have publi	c liability insurance?	Yes		No

If yes, please provide evidence along with your application. If no, please discuss with the project staff.





SECTION 2. ABOUT YOUR PROJECT 2a. Name of your Project 2b. Address (or location) of where your project will take place. Full postcode: or Grid Reference 2c. Describe your proposed project. (word count guidance 300) 2d. How does your project relate to lead and silver mining? (word count guidance 200) 2e. Who will benefit from your project? If working with specific groups, please specify them here (word count guidance 100)

Please remember that no retrospective expenditure is eligible.

2f. Please state the timescales for your project



Project start date:

Project end date:



$2g.\,Which\,of\,the\,Land\,of\,Lead\,and\,Silver\,objectives\,will\,your\,project\,meet?$

	Please tick all that are relev	vant
1	More and/or a wider range of people have engaged with, and learned about North	
_	Pennines lead and silver mining heritage	
2	North Pennines Lead and Silver mining and processing heritage is in a better	
	condition	
3	Communities within the North Pennines are better supported in accessing their	
	heritage	
4	More and/or a wider range of people will have volunteered time	
5	More and/or a wider range of people will have developed skills	

2h. How will your project meet the objective(s) you have selected?					





2i. Will your project involve buildings, land or objects? If so, do you own these outright? *If no, go to section 2j*

- If you do not own the land, building or item, tell us who does.
- Have you obtained permission from <u>all</u> owners?
- Please provide evidence to show permissions have been sought and granted.

If your project involves buildings or land, do you hold a lease of at least 10 years that cannot be terminated by the landlord?	
If your project involves buildings or land, please tick the statement which is applicable to you and provide evidence from the local authority.	ou,
Planning permission is NOT required Planning permission is required and has been granted	
2j. Does your project involve working with people under the age of 18 and/or vulnerable adults?	
If yes, please tick to confirm the following is in place:	
All employed staff and volunteers who work with under 18s/vulnerable adults within regulated activity have an up to date DBS (CRB) check.	
DBS (CRB) checks are renewed every 3 years.	
A child protection policy (if applicable)	
A vulnerable adults policy (if applicable)	





SECTION 3 – PROJECT COSTS	
3a. What will be the total cost of your project? (include value of in-kind and volunteer contributions in the total cost)	
3b. How much are you requesting from the Land of Lead and Silver Community Grants Schem	e?
 Please remember that for grants over £2,000 yo project costs up to a maximum of £10,000. 	ou can apply for a maximum of 80% total
 3c. If applicable, how will the remainder of the project Have you applied to any other grant funders? application(s)? If the remainder of costs will be funded from namounts. Please note which are in-kind contri (i.e. no more than 10% of the total project cost contributions 	If so, what is the status of this nore than one source, please specify the butions, up to half of the match funding
Is there anything that adds value to your project? E.g.	are volunteers involved
3d. Please provide a breakdown of all of the project consheet if necessary). Include here also items and activitions: where this is volunteers' time tell us what rate, and the minimum number of days' work the per day (a) 3 days each = £300)	ties that will be provided through in-kind nat activities they will be doing, valued at
Item or activity	Cost
	£
	£
	£
	£





TOTAL

£

£

3e. Hov	3e. How will you evaluate the success of your project?					





SECTION 4 – DECLARATION

Please be aware that you are making this application at your own risk and we cannot be responsible to anybody for any loss, damage or costs arising directly or indirectly from this application.

- I have read, understand and accept the notes that came with this application form. I understand and agree to you using and publishing the information in this application. I agree that you can check the information in it and any supporting documents with other people and organisations.
- The project, and my organisation's role in it, falls within my organisation's powers and purposes.
- My organisation has the power to accept a grant, under your terms, and the power to pay back the grant if the terms are not being met.
- I understand that any misleading statements (whether deliberate or accidental) I give at
 any point during the application process, or any information I knowingly withhold, could
 mean my organisation's application is not valid, in which case you will cancel the grant
 and claim back the money we have received, stop assessing and return the application,
 or withdraw any grant offered to my organisation.
- The project has not started yet and will not do so until my organisation receives permission from you.
- I understand you will treat this information in line with the General Data Protection Regulations and have read the Data Protection statement in the guidance notes. I accept that you may make this form available to members of the public under the Freedom of Information Act 2000 and in that event, notification will be given. Personal information will be processed in line with General Data Protection Regulations.
- On behalf of my organisation, I agree that if we receive any grant from you for our project, we will keep to the standard terms of grant and any further terms and conditions set out in the Grant Offer Letter.

We take from your signature(s) on this form as confirmation that you:

- Have understood we have legal responsibilities under the General Data Protection Regulations and the Freedom of Information Act 2000.
- Accept that we will not be responsible for any loss or damage you suffer as a result of us meeting these legal responsibilities.

Finally, I am authorised to put forward this application on behalf of my organisation and sign this declaration.

Print Name	
Position within Organisation (organisations only)	
Signature	
Date	





SECTION 5 - CHECKLIST

	eed to make an application. Applications will not be considered if incomplete.
	A completed Land of Lead and Silver Community Grant application form that is signed and dated by an appropriate person.
	If a request for capital items or equipment, at least 2 quotes for each item. Three quotes are required for items over £1,000. What is sent needs to show you have researched the costs and that the price within your project costs demonstrates best value for money. If unsure, please call us.
	Any necessary written permission required from land/building owner(s) if your application concerns land or buildings.
	Copy of planning permission and/or building regulations or a statement regarding the planning permission if your application concerns land or buildings.
	Child protection policy (if applicable)
	Vulnerable adults policy (if applicable).
	Evidence of appropriate disclosure within Disclosure and Barring Service (previously known as CRB) e.g. Name, disclosure number and date. Do not send the DBS (CRB) checks themselves. (if applicable)
	Please note that this is a legal requirement if your organisation works with children or vulnerable adults within regulated activity. See www.homeoffice.gov.uk for guidance.
	Any other information regarding the proposed project you feel will evidence what you have written in your application form.
Organ	isations only
	A signed and dated copy of your constitution/governing documents.
	Most recent set of accounts or records of expenditure. (If you are a new organisation then a letter from your bank giving your organisation's name and account number).
	An original bank statement which is dated 4 months ago or less. This will be returned to you. Most recent is best.



