



**Newnham Solar Community  
Grant Fund  
T1 Application Form  
Community Groups over £250**



|    |  |         |                         |                          |                       |
|----|--|---------|-------------------------|--------------------------|-----------------------|
| 1  | Name of organisation making application  |         |                         |                          |                       |
| 2  | Contact details of Chairman and Secretary / Treasurer  |         |                         |                          |                       |
|    | Chairman   | Name    |                         |                          |                       |
|    |  | Address |                         |                          |                       |
|    |  | Tel     |                         |                          |                       |
|    |  | E-mail  |                         |                          |                       |
|    | Secretary / Treasurer  | Name    |                         |                          |                       |
|    |  | Address |                         |                          |                       |
|    |  | Tel     |                         |                          |                       |
|    |  | E-mail  |                         |                          |                       |
|    | Please tick ( ✓ ) to whom communications should be addressed   |         | Chairman                | <input type="checkbox"/> | Secretary / Treasurer |
| 3  | Project name   |         |                         |                          |                       |
| 4  | Project start date   |         | Project completion date |                          |                       |
| 5  | Project cost   |         |                         |                          |                       |
| 6  | Grant amount sought  |         |                         |                          |                       |
| 7  | Have you approached this fund before?  |         |                         | <input type="checkbox"/> |                       |
| 8  | If yes, please give date   |         |                         |                          |                       |
| 9  | Grants / contributions from other sources  |         |                         |                          |                       |
| 10 | If you have approached other sources of funding for this project please give details below, including unsuccessful bids. |         |                         |                          |                       |
|    |  |         |                         |                          |                       |
| 11 | Please indicate the parish/es the project will take place in   |         |                         |                          |                       |
|    |  |         |                         |                          |                       |

12 Please give details on the proposed project. (Refer to guidance notes.)

|    |   |   |
|----|---|---|
| 13 | <p>Are any members of the group/organisation making this application:</p> <p>a) a member of staff or elected representative of Shaugh or Sparkwell Parish Council?</p> <p>b) connected with your project suppliers?</p> <p>If yes, please provide details</p> | ? |
|    |   |   |

|    |  |                          |
|----|--|--------------------------|
| 14 | <p>Supporting Information</p> <p>It is important that you include all of the relevant documentation listed below in support of your application. Please be as detailed as possible with the breakdown of the project costs, roles within the project and/or any building work specifications.</p> <p>Please tick ( ✓ ) each box to confirm that you have enclosed copies of:</p> |                          |
|    | a) Organisation accounts for the past two years  | <input type="checkbox"/> |
|    | b) Bank / building society statement showing current financial position  | <input type="checkbox"/> |
|    | The statement should show any funds raised as declared at Q.9  |                          |
|    | c) Breakdown of project costs  | <input type="checkbox"/> |
|    | d) Two supplier quotations for each item / activity over £500  | <input type="checkbox"/> |
|    | f) Community groups only – copy of signed constitution   | <input type="checkbox"/> |

|   |  |
|---|--|
| Signed on behalf of organisation  |  |
| Name in capitals  |  |
| Designation   |  |
| Date  |  |
| <p>Please return the completed application form with all supporting information to<br/><a href="mailto:admin@newnhamsolarfund.com">admin@newnhamsolarfund.com</a></p> |  |