

# **CHARVIL PARISH COUNCIL GRANT APPLICATION FORM ROUND TWO**

## **December 2024**

**CHARVIL PARISH COUNCIL**  
**GRANT APPLICATION FORM 2024 (ROUND 2)**

**Please read the attached policy before completing this form. Please use black ink and block capitals. You may continue on a blank sheet if necessary, but please put the name of your organisation on any additional sheets.**

**A. Your organisation**  
Please give us the following information about your organisation:

Name of Organisation: .....

Address:.....

.....Post Code: .....

Description of your organisation's activities. Please list your aims and objectives.

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How long has your organisation been in existence? .....

**B. Contact Details**

Name of contact: .....

Position: .....

Address for correspondence (if different from above):

.....

.....Post Code: .....

Tel:.....(daytime) .....(mobile)

Email: .....

**C. Your Application**

a) Brief description of project or scheme for which grant is intended

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b) Who will benefit from the proposed project or scheme and how many of these are Charvil residents?

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c) Total cost of project or scheme: £..... d) How much are you applying for? £.....

**D. Previous Applications**

Has your organisation previously applied for a grant from this Parish Council? If YES, please give details of the project and the date and amount of grant received if any. Was the project as described completed?

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**E. Additional Information**

Are there any other comments you wish to make to support this application? Please give this information below, or attach a separate sheet:

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**F. Your Financial Situation**

All applications must be accompanied by the following financial information: **If you do not supply this information your application will not be considered unless previously agreed in writing by the Council.**

- A copy of your latest approved statement of income and expenditure or other financial report which indicates your financial position, or
- Photocopy of bank statements covering the past six months
- A statement of your capital assets, if any

**If you are unable to supply this information, please contact the Parish Council for advice before submitting this application**

Please provide your Bank Details for prompt payment:

Bank.....  
Sort code.....  
Account number.....

**Signed:**.....

**Date:** .....

**Please return to Miranda Parker, Parish Clerk, Charvil Parish Council, 30, Park View Drive South, Charvil, Reading, Berks RG10 9QX by 1<sup>st</sup> December 2024. Late entries will not be accepted. All applications will be considered by the full Council at its meeting on 11th December.**

If you have any queries, please contact the Parish Clerk on 0118 9017719 or email [clerk@charvil.com](mailto:clerk@charvil.com) .

**FOR OFFICE USE ONLY**

Date received:.....

Grant awarded:.....

Amount:.....