

# Harrietsham Parish Council

## Community Schemes Grant Application Form

Please complete and return this application form to the address at the bottom of this form.

1. Name of Group Applying:

Number of members / number on roll:

2. Name of Project:

3. Please give one contact:

Name:

Position in Group:

Address:

E-mail:

Daytime contact number:

4. Brief description of Project:

*(including the number of parishioners likely to benefit directly from the funding)*

5. Has your group previously applied for a grant from Harrietsham Parish Council?  
(Please specify date and project name of last grant)

6. When will the grant be required?

7. Is your group able to reclaim VAT?

8. How much funding are you applying for?

9. If this grant is only part funding your project, please list the total cost of the project and provide details of other funding you have or are applying for.

10. Bank account name:

Sort Code:

Account Number:

**I confirm that:**

- **To the best of my knowledge and belief, all the information in this application is true and correct**
- **I have read the Parish Council's Grant Policy**
- **The Group or Organisation has and will abide by the Conditions of Funding, as stated in the Grant policy**

**Signed:**

**Name** (in capitals):

**Date:**

Please return this form to:

Parish Clerk: **Mrs Amanda Broadhurst**

Address: **4 Southfields Way, Harrietsham, Maidstone, Kent, ME17 1GE**

*OFFICE USE ONLY: (please complete ONE box only)*

**Application Granted**

Please state applicable powers:

**Application Refused**

Please state reason for refusal: