



Bridgend Town Council

Application for Grant Aid

All applicants are advised to read the Town Council's Grant Aid Policy prior to completing this form.

1. ORGANISATION NAME: <i>NB: This will be the name the payment is made to should an award be agreed</i>	
2. DESCRIPTION OF ORGANISATION:	
3. ORGANISATION ADDRESS:	
4. POSTCODE:	
5. EMAIL ADDRESS:	
6. REGISTERED CHARITY:	<p style="text-align: center;">YES / NO <i>(Please circle as appropriate)</i></p> <p>Charity Registration No:</p>
7. REASON FOR GRANT REQUEST: <i>Please provide details of the project and explain how the grant will benefit the residents of Bridgend.</i>	

REASON FOR GRANT REQUEST (Continued).		
TOTAL COST OF THE PROJECT:		
WHAT COSTS ARE YOU APPLYING FOR?	GRANT REQUEST FROM BTC	OVERALL COST
CAPITAL COSTS		
REVENUE COSTS		
OTHER SOURCES OF FUNDING APPLIED FOR/RECEIVED: <i>Please provide details and amounts of any funding received from other local authorities, charities, fund raising or any other sources of income.</i>		

APPLICATION CHECK LIST:

- A detailed description of what the Grant Aid will support and identifying how this will benefit the residents of Bridgend
- The most recent income and expenditure account or in the case of a new venture/initiative a fully costed current plan with financial information
- A chart showing the roles individuals take in the organisation as positions of responsibility
- Details of any additional funding secured or applied for, as well as any fundraising carried out
- Constitution or rules of the organisation

I confirm that if a grant is awarded, a written report will be provided within four months of the award date.

Signature: _____

Date: _____

(Person authorised to apply for and on behalf of the organisation named in Section1)