



Mid Devon Town, Parish and Community Fund 2017-2018

APPLICATION FORM

PLEASE READ THE CRITERIA AND GUIDANCE NOTES BEFORE COMPLETING THIS FORM
FOR MORE INFORMATION, PLEASE CONTACT THE TAP FUND PROJECT OFFICER: funding@middevon.gov.uk

Please note: application forms are shared with the County Committee and local town/parish councils (for project areas). Please do not include any personal information that you do not wish to be shared.

Section 1: Details of Applicant

Name of Organisation / Parish Council	
Charity registration number (if applicable)	
Contact name	
Position within organisation / council	
Email address	
Telephone number	
Description of organisation, including its aims:	

Section 2: Project information

Name of activity or project	
What is the main purpose of the project? Describe the activity or project including its aims; why you want to carry out the project and what difference it will make.	
Please state exactly what the TAP Fund grant is required for.	

How will the project benefit local people?	
Which parishes will benefit from it and how will they work together to achieve the project's aims?	

How have you identified the need for the project and who have you consulted or discussed it with?	
How do you know the project / activity is needed? What similar services already exist in the local area and how will this improve on them?	

When do you intend to start work on this project and how long is it likely to take?	
<i>If your project is phased, please enter the start and end dates for this phase.</i>	
Enter precise dates – <u>not</u> 'ASAP' or 'Ongoing'. Projects cannot start until after funding has been confirmed.	
Project start date	
Project end date	

Please note: Where projects have ongoing financial commitments, the TAP Fund can be used to support a pilot stage or identified phase of a project but we need evidence of a forward plan to demonstrate financial stability.

Details of the project's forward plan

Section 3: Project costs

Please note: Please provide a quote or similar evidence for the cost(s). Applicants must fund at least 10% of the total project costs from other sources (not including other DCC funding pots).

What is the total cost of the project / service?	£
Total amount of TAP Funding requested:	£

Breakdown of Costs
Please detail your outline project costs (continue on a separate sheet if necessary)

What other funding do you have confirmed?			
Source of funding	Confirmed	Tentative	Amount
	<input type="checkbox"/>	<input type="checkbox"/>	£
	<input type="checkbox"/>	<input type="checkbox"/>	£
	<input type="checkbox"/>	<input type="checkbox"/>	£
	<input type="checkbox"/>	<input type="checkbox"/>	£
How will the balance of any gap in funding be filled?			
Details of any other contribution/support (non-financial support eg gifts of goods and voluntary services)			

Section 4: Local Support

Have you contacted your local town / parish council to request their support?	Yes / No
Name of Town / Parish Council	
Name of Town / Parish Council	

Please attach letters/emails of support from local town/parish councils. Alternatively, please supply evidence that you have tried to obtain this support. **Please note:** if the nominated representative is clerk to two or more of the supporting parish councils, a separate nominated representative (such as Chair) should sign on behalf of one of the councils. Alternatively, a copy of minutes from the parish council meeting recording their support or an email from the Chair direct to the TAP Fund Project Officer will suffice.

Have you contacted your County Ward Member(s) to request their support?	Yes / No

Section 5: Declaration

I confirm that:

- I am authorised to sign on behalf of the Organisation named in Section 1 and that any funding will not benefit any individuals or private businesses and will only be used for the purposes specified in Section 2;
- Any unspent monies will be returned promptly to Mid Devon District Council;
- I will provide Mid Devon District Council with a statement of how the funding has benefited the local community and Town and Parish Councils involved in the specified project.

PRINT NAME	SIGNATURE	DATE

Section 6: Checklist

Please check you have provided or completed the following before submitting your application:

- Completed all sections of the application form
- Provided exact project / phase dates (with the project or this phase starting after the TAP Fund Panel meetings – see website for dates)
- The amount of TAP funding requested is not more than 90% of project costs
- Attached evidence of project costs (such as a quote)
- Attached evidence of local council support
- Contacted County Member(s) to request their support

Section 7: Submission information

Please submit your application (with supporting papers) direct to the TAP Fund Project Officer:
funding@middevon.gov.uk / Mid Devon District Council, Phoenix House, Phoenix Lane, Tiverton EX16
6PP