

NOTTINGHAMSHIRE HISTORIC CHURCHES TRUST

Reg. Charity No. 518335

Assisted by:



FORM OF APPLICATION FOR GRANT ASSISTANCE

This form and all requested documents should be returned to: *Mrs Linda Francis, 15 Tattershall Drive, Beeston, Nottingham, NG9 2GP*

Please answer every question. You may continue on additional sheets if required.

NAME OF CHURCH OR CHAPEL: _____

ADDRESS/LOCATION: _____

RELIGIOUS DENOMINATION: _____

DEANERY/CIRCUIT etc: _____

NAME AND ADDRESS FOR ALL CORRESPONDENCE:

TELEPHONE _____ e-mail: _____

STATUS OF APPLICANT _____

BRIEF DESCRIPTION OF CHURCH/CHAPEL (eg. date, building materials etc):

IS THE CHURCH A LISTED BUILDING? _____ IF YES, WHAT GRADE _____

PLEASE SUMMARIZE THE WORKS FOR WHICH GRANT ASSISTANCE IS SOUGHT:

Please supply a photographic illustration of the project. *(It should be noted that unless applicants state otherwise, these photographs may be used by the Trust to illustrate projects they have supported.)*

APPROX. HOW MANY PEOPLE WILL BENEFIT FROM THIS PROJECT? _____

WHAT ARE THE COMMUNITY BENEFITS?

HAS THE APPROVAL OF THE APPROPRIATE AUTHORITIES BEEN OBTAINED (eg. for Anglican churches, a faculty)? _____

(Note: no grant can be made unless permission has been obtained before work commences)

TOTAL ESTIMATED COST OF PROPOSED WORKS: £

(Please supply copies of estimates and/or priced specifications)

ARE YOU USING A PROFESSIONAL ADVISOR (eg. an architect)? PLEASE GIVE DETAILS:

PLEASE GIVE DETAILS OF FUND-RAISING ACTIVITIES MADE SPECIFICALLY TOWARDS THE COST OF THE PROPOSED WORKS:

HAVE YOU MADE A GRANT APPLICATION TO THE NATIONAL CHURCHES TRUST* OR ANY OTHER GRANT-AIDING BODY? (if yes, please give details)

* *The National Churches Trust*, 31 Newbury Street, London EC1A 7HU
Telephone 0207 600 6090. e-mail: info@nationalchurchestrust.org. Website www.historicchurches.org.uk

HAVE YOU SUBMITTED ANY OTHER APPLICATIONS FOR A GRANT UNDER THE LANDFILL TAX ACT FOR THIS PROJECT? (if yes, please give details)

WHAT AMOUNT OF THE TOTAL SUM HAS BEEN RAISED OR PROMISED: £

More detailed information as to how the project has been funded may be required at a later date.

WHEN IS WORK EXPECTED TO COMMENCE? _____

WHEN IS WORK PROGRAMMED FOR COMPLETION? _____

HAS ANY WORK ALREADY COMMENCED? _____

IS YOUR BODY A REGISTERED CHARITY? _____

PLEASE CONFIRM THAT YOU ARE NON-PROFIT MAKING _____

WHAT IS THE NAME OF YOUR LOCAL PLANNING AUTHORITY? _____

NOTE: Please supply a copy of the financial accounts for the last two completed years for the organization responsible for the upkeep of the building. **Failure to provide this information may invalidate grant assistance.**

SIGNED _____ DATE _____

Please attach any other material, which you feel relevant to support your application.
