

*Huish Episcopi Parish Council*  
**COMMUNITY GRANT APPLICATION FORM**  
**ONE-OFF GRANT**  
**(of amounts of £1,000 or less)**

Name of the organisation	
Address of website, if available	
Bank account details	Sort Code: Account Number: Name of Account Holder: <i>(as appears on statements)</i>
Name of person(s) submitting the application	
What is your position in the organisation?	
Contact address, including phone number & email address	
Geographical area covered (delete as appropriate)	Huish Episcopi/ Huish Episcopi & district / wider area
Aims, objectives or activities of the organisation	
Do you target a specific age range? If so what is it?	YES/NO      Age Range _____
Do you target disabled groups?	YES/NO
How much funding are you applying for?	£
What is the funding to be used for?	
Do you currently receive funding from other sources and, if so, from where and how much?	

Are you applying to other funding organisations for support and, if yes, who are they?	

Please return this form to  
**The Parish Clerk, Nyumbani, Bow Street, Langport TA10 9PS**  
or email to [clerkhepc@gmail.com](mailto:clerkhepc@gmail.com). Tel 07568 368039

The following documents must be included with your application form. Scanned or electronic copies are acceptable. Incomplete submissions will be returned for completion.

<b>Document</b>	<b>Please indicate to show that you have included it</b>
A copy of your constitution	<b>YES/NO</b>
A copy of your certified audited accounts for the last two years. In the case of smaller organisations, income and expenditure statements for the last two years certified by a qualified accountant may be submitted instead. Where such statements have not been certified, they must be signed by two persons from within the organisation who have been appointed to act as auditors	<b>YES/NO</b>
A project plan that sets out how the money will be spent and what the outcomes of the project will be	<b>YES/NO</b>
Last 3 Months of bank statements	<b>YES/NO</b>

**Please refer to the Council's Community Grant Funding Policy for full details of our terms and conditions.**

Signature of applicant .....

Date .....

*Huish Episcopi Parish Council*  
**COMMUNITY GRANT APPLICATION FORM**  
**REGULAR FUNDING**  
 (of amounts *greater* than £1,000 p.a)

Name of the organisation	
Address of website, if available	
Bank account details	Sort Code: Account Number: Name of Account Holder: <i>(as appears on statements)</i>
Name of person(s) submitting the application	
What is your position in the organisation?	
Contact address, including phone number & email address	
Geographical area covered (delete as appropriate)	Huish Episcopi / Huish Episcopi & district / wider area
Aims, objectives or activities of the organisation	
Do you target a specific age range? If so what is it?	YES/NO      Age Range_____
Do you target disabled groups?	YES/NO
How much funding are you applying for?	£
What is the funding to be used for?	

Do you currently receive funding from other sources and, if so, from where and how much?	
Are you applying to other funding organisations for support and, if yes, who are they?	

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<i>Document</i>	<i>Please indicate to show that you have included it</i>
A copy of your constitution	YES/NO
A copy of your certified audited accounts for the last two years. In the case of smaller organisations, income and expenditure statements for the last two years certified by a qualified accountant may be submitted instead. Where such statements have not been certified, they must be signed by two persons from within the organisation who have been appointed to act as auditors	YES/NO
A business plan or something similar that sets out what activities you have planned over the next three years and how they will be funded	YES/NO
Last 3 Months of bank statements	YES/NO

Successful applicants will be required to sign a Service Level Agreement with Huish Episcopi Parish Council.

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Signature of applicant .....

Date .....