



NORTH  
NORFOLK  
DISTRICT  
COUNCIL

A better place for supporting communities

# COMMUNITY TRANSPORT FUND



## Grant Application Form

[www.north-norfolk.gov.uk](http://www.north-norfolk.gov.uk)

Before completing the application form please read the Community Transport Prospectus to ensure that : -

- your organisation is eligible to apply
- your project and what an award would be used to fund meets the criteria.

Please use the supporting documentation checklist to make sure all the requested documents are enclosed with this application form.

If you require any additional help in completing your application or you have any questions please contact Sonia Shuter at North Norfolk District Council on 01263 516173 or email [sonia.shuter@north-norfolk.gov.uk](mailto:sonia.shuter@north-norfolk.gov.uk)

## SECTION 1 - CONTACT DETAILS FOR THE ORGANISATION

1. Name and address of the Organisation

Address of Organisation

2. Type of organisation (e.g. Local Charity, Community Interest Company)

3. Contact Name

Position within the Organisation

Contact Postal Address

Contact Phone Number

Daytime

Mobile

Contact Email

We may need to contact you regarding the application so please give preferred method of contact.

Email

Phone

Post

Either

4. Please provide the contact details of an independent referee who is not directly connected to the organisation and who will be completing the independent referee form. This person should not be an NNDC officer but can be a district councillor

Name

Postal Address

Contact Phone No's

Daytime

Mobile

Email Address

## SECTION 2 – ABOUT THE ORGANISATION

1. What services do you provide? Please tick all that apply

<input type="checkbox"/>	Good Neighbour Scheme
<input type="checkbox"/>	Dial-a-ride
<input type="checkbox"/>	Community Car/Minibus Scheme
<input type="checkbox"/>	Community Shopper Bus
<input type="checkbox"/>	Medi-Ride Service
<input type="checkbox"/>	Personal door-to-door service which enables users to access medical/dental/occupational appointments, shops and other services.
<input type="checkbox"/>	Access to work/study schemes
<input type="checkbox"/>	Other
Other – please specify	
<div></div>	

2. Tell us a bit about the services you provide i.e. how often do they run, reason for the journey, age range

3. Who is eligible to use your Organisations services

--

4. Please list the villages, parishes or towns in North Norfolk covered by your Organisations services

--

5. What is the project you are applying for funding for?

--

6. Will the funding be for

A New Service

--

Continuation Funding

--

--

If for continuation funding please go directly to question 12

7. Who will be eligible to use the new service?
8. Where in North Norfolk will the new service operate?
9. How often will the new service operate?
10. How will the new service benefit the community?
11. How do you know this service is needed?

12. Will the funding be used to continue to run the service as it is or will it be used to enhance the current service provided i.e. increase the geographical area covered or increase the frequency of journeys?

13. How many individual passengers does your current service provide transport for during the course of an average week?

14. How many paid staff does your service employ?

Full Time		Part Time	
-----------	--	-----------	--

15. How many volunteer staff does your service have?

### SECTION 3 – FINANCIAL INFORMATION

1. What is the total annual cost of your existing service?

2. How much will your new / continuation service cost annually?

3. Please provide details of your existing sources of funding, including amounts where possible.

Source of Funding	Amount	Conditions/Restrictions
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

4. Do/Will passengers pay a contribution to the service?  
(i.e. annual membership fee, per journey, per mile, hire charge)

Yes	No
<input type="text"/>	<input type="text"/>

If Yes please provide details

5. Does the organisation have any Reserves?

Yes	No
<input type="text"/>	<input type="text"/>

If yes, are these funds committed/allocated?

Yes	No
<input type="text"/>	<input type="text"/>

Please provide details

6. How much are you applying for?

7. What is the minimum amount you would need?



8. How will any remaining costs be met?

--

9. Please provide a breakdown of how the grant is to be spent  
(i.e. fuel, insurance, salaries, volunteer costs, premises)

Expenditure			
	Net	VAT	Total
Total			

10. What would happen if you did not receive all of the funding requested?

--

**SECTION 4 - BANK DETAILS**

1.

Name on the Bank Account

2.

Name of the Bank

3.

Branch Address

4.

Sort Code

-

-

5.

Account No.

## SECTION 5 - DECLARATION

Please ensure that you have answered all of the questions on the application form and attached all supporting documentation required otherwise your application cannot be considered.

- I, as the main contact named in Section One of this application form am authorised to apply for a grant from the North Norfolk District Council Community Transport Grant Fund on behalf of the Organisation.
- I understand that if I make any misleading statements (whether deliberate or accidental) at any stage during the application process, or knowingly withhold any information, this could make the application invalid and the organisation could be liable to repay any funding which they may already have received.
- I confirm that the organisation has the legal power to set up and deliver the project described in this application form.
- I understand that part or all of the information provided may be held electronically. This information will be used for the administration of applications and grants and for statistical analysis. This information may be shared with individual or organisations that may be consulted when assessing applications, verifying data and monitoring grants.
- I understand that if information about this application is requested under the Freedom of Information Act that North Norfolk District Council may release it

Signature

Name (Block Capitals)

Position within Organisation

Date

### **Please keep a copy of this application**

Send your application complete with all supporting documentation to:

Email: - [supporting.communities@north-norfolk.gov.uk](mailto:supporting.communities@north-norfolk.gov.uk)

By Post: - Sharon Garth, Community Support, North Norfolk District Council, Holt Road, Cromer, Norfolk NR27 9EN

## COMMUNITY TRANSPORT FUND

North Norfolk District Council, Holt Road Cromer, NR27 9EN Tel:  
01263 516284

Email: [supporting.communities@north-norfolk.gov.uk](mailto:supporting.communities@north-norfolk.gov.uk)