

A better place for supporting communities

COMMUNITY TRANSPORT FUND



Grant Application Form



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 Sharon Garth at North Norfolk District Council on 01263 516248 or email supporting.communities@north-norfolk.gov.uk

SECTION 1 - CONTACT DETAILS FOR THE ORGANISATION

1.	Name and a	ddress of	the Organisatio	on		
	Address of (Organisati	on			
2.	Type of org	anisation	(e.g. Local Cha	rity, Community	Interest Comp	pany
3.	Contact Na	me				
	Position wit	thin the Or	ganisation			
	Contact Pos	stal Addre	ess			
	Contact Pho	one Numb	er Daytime		Mobile	
	Contact Em	nail	_			
	may need to contact.	contact y	ou regarding t	the application so	o please give p	oreferred method
		Phone	Doct	⊏i+b o⊭		
	Email	Phone	Post	Either		
1				f an independent		
4.	form. This p	person sho	ould not be an I	NNDC officer but	can be a dist	ependent referee rict councillor
	Name					
	Postal Addı	ress				
	Contact Ph	ono Nois	Daytime		Mobile	
			Daytime		Mobile	
	Email Addr	ess				

SECTION 2 – ABOUT THE ORGANISATION

1.	What services do you provide? Please tick all that apply
	Good Neighbour Scheme
	Dial-a-ride
	Community Car/Minibus Scheme
	Community Shopper Bus
	Medi-Ride Service
	Personal door-to-door service which enables users to access medical/dental/occupational appointments, shops and other services.
	Access to work/study schemes
	Other
	Other - please specify
	Tall us a bit about the services you provide it how often do they run reason for
2.	Tell us a bit about the services you provide i.e. how often do they run, reason for
2.	Tell us a bit about the services you provide i.e. how often do they run, reason for the journey, age range
2.	Tell us a bit about the services you provide i.e. how often do they run, reason for the journey, age range
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3.	Who is eligible to use your Organisations services
	Diagon list the villages parishes or towns in North Norfell, sovered by your
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.	
10.	How will the new service benefit the community?
11.	How do you know this service is needed?

12.	Will the funding be uenhance the current or increase the frequ	service provided i.e.	un the service as it is increase the geograp	
13.	How many individua during the course of		ou current service pro	vide transport for
13.			ou current service pro	vide transport for
	during the course of	an average week?		vide transport for
13. 14.	during the course of How many paid staff	an average week?	mploy?	vide transport for
	during the course of	an average week?		vide transport for
	during the course of How many paid staff	an average week? f does your service e	mploy? Part Time	vide transport for

SECTION 3 - FINANCIAL INFORMATION

V	Vhat is the total annual	cost of your existing s	service?		
	low much will your new nnually?	/ continuation servic	e cost		
	lease provide details o here possible.	f your existing sources	of fundin	g, including	amounts
	ource of Funding	Amount		Conditions	/Restrictio
<u> </u>		1		<u> </u>	
D	00/Will passengers pay .e. annual membership fee, p	a contribution to the	service?	Yes	No
			harge)		
lf	Yes please provide de	tails			
			1		
	oes the organisation h		Yes	No	
	yes, are these funds collease provide details	ommitted/allocated?	Yes	No	
Р	rease provide details				
]	
ΓH	low much are you appl	ying for?			
V	Vhat is the minimum ar	nount you would need]		

8.	How will any remaining costs be met?			
9.	Please provide a breakdown of how the g (i.e. fuel, insurance, salaries, volunteer costs, premis	rant is to be s _l	pent	
	Expenditure			
		Net	VAT	Total
	Total			
	i otai			
10.	What would happen if you did not receive	all of the fund	ding 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

COMMUNITY TRANSPORT FUND

North Norfolk District Council, Holt Road Cromer, NR27 9EN

Tel: 01263 516284

Email: supporting.communities@north-norfolk.gov.uk