

SOUTH MOLTON TOWN COUNCIL

APPLICATION FOR GRANT

This form **MUST** be completed in type or using black ink so when it is printed Councillors can read it.

I wish to apply for a grant to be paid in the 12 months commencing April 2018.

On behalf of:

Name of Organisation:

Aims of the Organisation (if no constitution enclosed)

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.....

Amount of grant requested (This **MUST** be completed) £ _____

Purpose(s) for which the grant will be used

.....

Names of other bodies who have been asked for grants or who will be approached:

.....

If your organisation covers an area outside South Molton and you have not sought a grant from other Parish Council's please state why

.....

In the past Grants have been received from

.....

Please state how your organisation specifically benefits the residents of South Molton

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Please enclose a copy of your most recent balance sheet or make arrangements to forward one in the future if it is not available now and include any additional information you wish to give on a separate sheet. **NB: No applications will be considered if a balance sheet is not supplied.**

Signed Name

Tel No: Address

Date

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