



Newtown & Llanllwchaiarn Town Council

Application for Newtown Community Fund Grant

(Supply by end of April for consideration in May
and end of September for consideration in October)

Name of Organisation	
Purpose of Organisation	
Address of organisation's main address	
Name, status & contact address of main contact	
Telephone number & email address of contact	
Is the organisation a registered Charity	Yes/No Number.....
For what purpose or activity is the grant requested	<p>(Please continue on a separate sheet of paper if necessary)</p>
No. of people in NEWTOWN who will benefit from activity – please tick	0-10..... 11-50..... 51-100..... 100+..... Whole Town.....
How will you encourage the use of the Welsh language	

How will the grant be spent? (If possible please include VAT)

Item/Activity	Amount (£)	Grant Requested (£)
Total	£	£

How will the difference, if any, be funded

Total amount of current reserves* = £

Is there any reason why the activity cannot be funded from these reserves

*See terms of reference

What is the end date of the activity? =

Name of Bank Account to which cheque should be made payable (This must be the organisation name)	
Two names of Account Signatories (Please Print)	1..... 2.....
Bank account sort code and account number	

Declaration and signature

I certify that the information included in this form is accurate and agree to abide by the grants policy

Name, position and address of signatory	
Date	Signature:

Have you supplied?

- Your signed application form
- A signed copy of your constitution*
- A copy of your latest accounts*
- Photocopies of the last two months statements and/or building Society entries
- Evidence of what, if any, reserves the organisation holds*

In event you are unable to supply any of the information required please use the space below (and over) to explain why.

*see terms of reference