

Warm Welcoming Spaces Grant Application Form
2022-2023

Please read the Guidance Notes carefully before completing the application form.

This form should be used for applications for the Warm Welcoming Spaces Grant funded by The Public Health Team at West Northamptonshire Council.

The Warm Welcoming Spaces Grant has been developed to support the creation and / or enhancement of Warm Spaces provided by the Voluntary, Community and Faith sector across West Northamptonshire to support residents struggling with fuel costs.

Applications not made on this form cannot be considered.

Please complete this form fully. We cannot consider information relevant to your application if it has not been included with this form.

Please note that the minimum amount of grant that can be applied for is £500. The maximum grant that can be applied for is £1,500.

The grant process will close on 1 March 2023, organisations may apply only once.

Forms should be returned to: communitygrants@westnorthants.gov.uk with the subject ‘Warm Welcoming Spaces Grant Application Form’.

Help and advice about making an application is available. **Please see guidance notes for details.**

If you have any queries regarding the application form, please e-mail them to: emma.parry@westnorthants.gov.uk

|  |  |
| --- | --- |
| FOR OFFICE USE ONLY |  |
| Reference number: |  |
| Date received: |  |
| Application and documents checked | Complete / Incomplete |
| Recommended funding | £ |
| Total funding allocated  | £ |

**PART A – GRANT APPLICATION DETAILS**

1. Organisation's name, type and registered charity number or Companies House registration number where applicable:

|  |  |
| --- | --- |
| Organisation name: |  |
| Organisation type: |  |
| Registered charity /Companies House number: |  |

1. Organisation's address details of main / registered office and applicant's (the person who is completing this application) contact details:

|  |  |
| --- | --- |
| Address of organisation: |  |
| Postcode of organisation: |  |
| Telephone number of organisation: |  |
| Email address of organisation: |  |
| Web address of organisation: |  |
| Applicant's name: |  |
| Applicant's telephone number: |  |
| Applicant's mobile number: |  |
| Applicant's email address: |  |

|  |  |
| --- | --- |
| Name: |  |
| Address: |  |
| Postcode: |  |
| Telephone: |  |
| Email: |  |

1. **Provide** the address where all correspondence should be sent to if different from the organisation's address **above:**
2. Do you have any communication needs (such as textphone, sign language, other language)?

|  |
| --- |
|  |

|  |  |
| --- | --- |
| Month: |  |
| Year:  |  |

5. When was your organisation setup/established:

6. What are the aims, objectives, and purpose of your organisation:

|  |  |
| --- | --- |
| Aims: |  |
| Objectives:  |  |
| Purpose: |  |

**PART B – ABOUT THE SERVICE/PROJECT**

The Warm Welcoming Spaces Programme is seeking to award grants to voluntary, community and similar not-for-profit organisations that wish to set up and / or develop existing Warm Welcoming Spaces to support those residents struggling with fuel costs

7. Project/Service Name:

|  |
| --- |
|  |

8. Brief description of what you are applying for (how will you spend the grant)?

|  |
| --- |
|  |

9. Brief overview of how this funding will help you deliver Warm Welcoming
 Spaces to the Community?

|  |
| --- |
|  |

10. How many people will benefit from your project/service

|  |
| --- |
|  |

11. Please identify which communities in West Northamptonshire will benefit

|  |
| --- |
|  |

12. Please identify which services will be available to clients at the Warm
 Welcoming Space

|  |
| --- |
|  |

13. Proposed start and completion date of the grant funded work

|  |
| --- |
| Start Date |
| Month: |  | Year: |  |
| Completion Date |
| Month: |  | Year:  |  |

14. When will the project/service be accessible to users

|  |  |
| --- | --- |
| Proposed start/availability date: |  |
| Opening/availability hours: |  |
| Opening/availability days of the week: |  |
| Opening/availability weeks per year: |  |

**PART C – GRANT REQUESTED**

Please note that the minimum amount of grant applied for from the Warm Welcoming Spaces Fund must be at least £500 and the maximum must be £1500

15. Amount of grant applied for

|  |
| --- |
| £ |

16. Organisations must provide details of the purchases they wish to make

**NB** All amounts claimed must be net of VAT if you are claiming back the VAT from HMRC. The Council will not pay the VAT element of your costs if you can claim these back from HMRC.

Do you intend to claim VAT (please circle): Yes or No

If Yes, Please supply your VAT Number:……………………………………………

|  |  |
| --- | --- |
| Name of Supplier:  |  |
| What is being purchased:  |  |
| Price including VAT: | £ |
| Price excluding VAT:  | £ |

|  |  |
| --- | --- |
| Name of Supplier:  |  |
| What is being purchased:  |  |
| Price including VAT: | £ |
| Price excluding VAT:  | £ |

17. What contribution if any, are you making towards this service/project from
 your own resources?

|  |  |
| --- | --- |
| Financial:  |  |
| In-Kind:  |  |

18. Bank Account Details

|  |  |
| --- | --- |
| Name of Bank: |  |
| Bank Account Payee: |  |
| Bank Account Number:  |  |
| Sort Code:  |  |

19. Details for Remittance Slip

|  |  |
| --- | --- |
| Organisation Name: |  |
| Full Postal Address: |  |
| Post Code: |  |
| Telephone Number: |  |
| Email Address:  |  |

**PART D – APPLICANT DECLARATION**

20. Agreement and Undertaking:

Please read this section carefully before signing. It is your responsibility to ensure your application is properly presented.

* Please ensure you have completed every part of this application form. Omissions of vital information in your application may lead to it being rejected.
* By signing this agreement, you undertake to provide the following reporting:
* A Snapshot of attendees per month broken down by age groups, ethnicity, and long-term health conditions for example Cardo-Vascular and Respiratory diseases where possible
* Number of attendees per month who have been referred on to other services for example: CAB, Social Prescribers etc
* Case studies to illustrate individual stories showing impact of use of Warm Spaces to their lives.
* By signing this agreement, you undertake:

Data Protection Act – West Northamptonshire Council will use the information provided on the application form during assessment and for the life of any grant awarded. In addition, the information and supporting documentation will be used in the analysis of the grant process and for our own research. The Council may give copies of this information to individuals and organisations we consult when assessing applications, when monitoring grants and evaluating the way the Council’s funding programmes work and the effect they have. These individuals and organisations may include accountants. The Council recognises the need to maintain the confidentiality of applicants and their details will not be made public in any way, except as required by law.

21. Declaration:

I the undersigned agree:

* 1. to utilise any grant from West Northampton Council solely in connection with the activity described in this application form. If for any reason the grant is unused it will be repaid within 12 months of the grant allocation;
	2. to keep the appropriate coordinator of West Northamptonshire Council appraised of any proposed changes to the activity, the organisation’s manager, or changes in contact details;
	3. to recognise West Northamptonshire Council in any and all literature related to the activity;
	4. to provide West Northamptonshire Council with information which will enable West Northamptonshire Council to monitor achievement of the stated outcomes;
	5. To comply with all relevant legislation including health and safety and food law.  If you are serving food, please register with West Northamptonshire Council at <https://www.westnorthants.gov.uk/food-businesses/food-business-registration> and

* 1. That by signing this declaration you understand the obligations under the Data Protection Act 1998.

|  |  |
| --- | --- |
| Name:  |  |
| Position Held:  |  |
| Signature:  |  |
| Date:  |  |