



LLANDRINDOD WELLS TOWN COUNCIL SMALL GRANT APPLICATION FORM

Llandrindod Wells Town Council (LWTC) are looking for applications of up to £250 which demonstrate;

- Improved Physical, Mental, Emotional Health & Social Wellbeing, and Environmental or Economic outcomes.
- Include a direct positive impact for Llandrindod Wells residents.

For more information, please see the Terms and Conditions & guidance notes which can be found at <https://www.llandrindod.co.uk/town-council/grant-applications>

NB: Small grants are limited to 2 applications per organisation during the Town Council's financial year. (1st April - 31st March)

Please return your completed form to
llandrindodcouncil@btconnect.com

Llandrindod Wells Town Council
Old Town Hall
Temple Street
Llandrindod Wells
Powys
LD1 5DL

Contact Details

Name of the person making the application	
Position in organisation	
Email address	
Telephone number	

Organisation Details

Name of Organisation	
Address	
Post Code	
Telephone Number	
Email	
Website	
Social Media	

Organisation Structure

Which describes your organisation?	<ul style="list-style-type: none"><input type="checkbox"/> Charity<input type="checkbox"/> CIC (Community Interest Company)<input type="checkbox"/> CBS (Community Benefit Society)<input type="checkbox"/> CIO (Charitable Incorporated Organisation)<input type="checkbox"/> COOP (Cooperative)<input type="checkbox"/> Other (please provide more details below) <hr/>
Registration / Company Number (if applicable)	

What are the general aims and objectives of your organisation?	

Project

Name of Project or Activity		
What is the delivery time scale of your Project or Activity?	Start (mm/yyyy):	Finish (mm/yyyy):
Amount of funding requested from LWTC		

Description of Project or Activity

Total cost of the project/event?

How will the additional costs be funded?

Bank Details

Name of Bank Account to which payment should be made (This must be the organisation name)	
Two names of Account Signatories (Please Print)	1 2
Bank sort code and account number	S/Code: Acc.No:

Declaration

We confirm that all the information contained within this application is true and accurate to the best of our knowledge and belief, and that we are authorised to submit this application on behalf of the group.

We have read and agree to abide by the terms and conditions.

(please click/tick box to agree)

We agree to credit Llandrindod Wells Town Council for the funding for this project through our communications and are happy for LWTC to share stories and grant feedback through their communications.

(please click/tick box to agree)

We are happy to arrange visits by LWTC staff and councillors to our project while it is being delivered.

(please click/tick box to agree)

We have provided copies of the following necessary documents (refer to Grant Application Information) to support the application (please click/tick as appropriate):

Bank statements (2 most recent Bank Statements)

Constitution

NB. Scanned copies are acceptable if you send your application by email.

Applications will not be taken to committee without all of these supporting documents

Signature 1 (person submitting form)

Signature 2 (Chair or senior representative of the organisation)

Typed entries acceptable for email applications

Date: