

The Jubilee Room Braywood Memorial Hall Fifield Road Fifield SL6 2NX

Tel: 01628 777997

Web: www.brayparishcouncil.gov.uk

Twitter: @parishbray

| Name of Organisation | |
|---|--|
| Address of Organisation | |
| Contact Number | |
| Name of Contact | |
| Position with Organisation | |
| e-mail Address | |
| Nature of organisation making the application | |
| Number of members that are resident in the Parish or would benefit from the organisation. | |
| Amount Requested | |
| This must be a specific amount for example £200 and not a request for a donation. | |
| Details of any previous applications made to Bray Parish Council. | |
| Purpose/Project for which funding is required. | |
| Will income from the grant be used for events that make payments to charity, if so please provide details of the charities to be supported. | |
| Is the grant required for capital expenses or running costs. | |
| If the project is a capital expense, what is the life expectancy of the capital item? (Please provide copies of quotes received) | |

| Percentage of total | | |
|---|---|--|
| expenditure. | | |
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| If the funding is for running | | |
| costs, what other sources of | | |
| income are available. | | |
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| What efforts have been made | | |
| to raise funds from other | | |
| sources and success. | | |
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| Expected date of | | |
| expenditure. | | |
| Are any other permission(s) | | |
| required, e.g. planning | | |
| permission. | | |
| Bank Name * | | |
| Sort Code * | | |
| Account Number * | | |
| Financial Information Please pr | ovide details of Income, Expenditure and current balance | |
| | addition pages if required. Copies of quotes should also | |
| accompany any requests for gr | | |
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| Applications will not be considered if this information is not provided. National organisations should provide this information at a local level. | | |
| Should provide this information at a local level. | | |
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| Please note information will be shared with Bray Parish Councillors, items highlighted will be redacted. | | |
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