Mrs Mandy Evans Clerc y Dref a Swyddog Cyllid



Mrs Mandy Evans Town Clerk & Finance Officer Town Hall Llanddulas Road Abergele Conwy **LL22 7BT** 

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Ein Cyf /Our Ref: ME/FT

Eich Cyf / Your Ref:

#### **GRANT APPLICATION 2025**

#### **Guidelines**

Applications are invited annually from Voluntary Groups, Community Groups or Charities operating in the Abergele area.

#### **ALL APPLICATIONS** must be accompanied by the following:

For applications up to and including £999

- Copy of latest available Statement of Accounts
- Covering letter on headed paper
- Copy of latest bank statement

For applications £1000 and over

- Copy of latest available Audited Accounts
- Covering letter on headed paper
- Copy of latest bank statement

Completed applications should be submitted to:-

The Town Clerk Abergele Town Council Town Hall Llanddulas Road ABERGELE. **LL22 7BT** 

Grant applications for 2025'26 must be received by 31st October 2024

Please note that applications submitted without the relevant documents as listed above will not be considered.

(Applications of an urgent nature may, at the Council's discretion, be considered at an earlier meeting of the Ordinary Committee)

In line with data protection regulations, this office processes personal data for grant application purposes under the lawful basis of 'Public Task'. In instances where this lawful basis is not sufficient and explicit consent is required, a member of the office will get in touch with you to establish your consent.

### **Application for Grant Funding 2025**

Details about your organisation	<u>r / group</u>
Name of Organisation / Group:	
Name of Secretary:	
Address:	
	Post Code:
Tel:	E-mail address:
Name of Treasurer:	
Address:	
	Post Code:
Tel:	E-mail address:
Organisation/ Group bank detai	ils (Please print in CAPS)
Name of bank	
Name of bank account	
Account number	Sort code
What are the main aims / objective	,
Where and when does your organ	nisation meet? (if applicable)

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#### **Project / Activity Details**

How much money are	e you applying for?		£		
For what purpose? (please continue on a separate sheet, if required)					
Please provide a brea	akdown of the estimated	total costs of the pro	oject/activity/event:		
Please provide detail	s of any other sources of	income to be used	towards this project/activity/event:		

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Approximately now many people from the Abergele area v				
project/activity/event?			•••••	
Has your Organisation / Group received a grant from this	Cou	ncil	prev	riously?
YES /NO If YES, please provide details:				
Please provide any other information that you would wish considering this application:				
			• • • • • • •	
<b>Statement</b> (to be completed by the Chairman/Secretary/T	reas	sure	er of	the Organisation)
I confirm that all the information on this form is true and confor the specified purpose(s) only.	orrec	et ai	nd th	at any grant received will be used
I confirm that I have enclosed a copy of the following docuplease state reason below):	ımer	ntat	ion to	o support this application (if not,
Copy of latest Audited or Statement of accounts	Υ	/	N	(whichever is applicable)
Copy of latest bank statement	Υ	/	N	
Covering letter on headed notepaper	Υ	/	N	
Name: Pos	sitior	1:		
Signature: Dat	e:			

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