**MAIN PROJECTS**

**ERDF Grant Application Form**

***Please refer to our guidance notes for assistance with completing this form***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1** |  | **GENERAL INFORMATION** | | |
| **Organisation Name** | | |  | |
| **Organisation Address** | | |  | |
| **What is the Organisation’s Legal Status?** | | | **Sole Trader Partnership**  **Limited Liability Partnership**  **Limited Company**  **Other (please specify)** | Yes/No  Yes/No  Yes/No  Yes/No |
| **Please Provide the Following Where Applicable** | | | **Charity Reference Number**  **VAT Registration Number**  **Registered Company Number** |  |
| **Are any members of your Organisations Personnel either related to any member of the Programme Management Team, Folkestone & Hythe District Council staff and Councilors, or to a Local Action Group member?** | | | Yes/No  *If ‘Yes’ Please Provide Details:* | |
| **Lead Contact Name** | | |  | |
| **Position within Organisation** | | |  | |
| **Contact Address (if different from Organisation Address)** | | |  | |
| **Contact Telephone Number** | | |  | |
| **Contact E-mail** | | |  | |
| **Name of any other organisations involved in the project** | | |  | |
| **Project Title** | | |  | |
| **Total Project Cost (£)** | | |  | |
| **ERDF Funding required (£)** | | |  | |
| **Project Start date** | | |  | |
| **Project end date** | | |  | |
| **Which Action(s) will you project address (refer to call specification)?** | | |  | |

|  |  |  |
| --- | --- | --- |
| **2** |  | **PROJECT METHODOLOGY & MANAGEMENT** |

**2.1 Project Overview**

**Please provide a brief description of the project in the space below, including separate paragraphs on the main aims, objectives, why it is likely to achieve the Objectives of the Programme Strategy and Actions within the Call , who will be doing what, where and for how long, and outputs targets (max 3,000 characters) – bullet points accepted.**

*Note: This description may be used in the project funding agreement and could also be placed on the Folkestone Community Works website for publicity purposes.*

|  |
| --- |
|  |

**2.2 Project Plan**

**Please attach with this application a detailed Project Plan which should be no more than 3 pages long.**

*This should clearly identify the activities to be delivered during the project by whom and the outputs associated with the activities, in quarterly calendar time blocks (January –December). Please provide a Gantt Chart. In addition a 5 year Business Plan is required. Please attach.*

|  |
| --- |
|  |

**2.3 Project Outputs**

**Please fill in Outputs annex spreadsheet (C2.4b Main Project Grant Application – Outputs Annex.xls) and include with your application. This annex will be part of your grant agreement.**

*Please note:**You will need to maintain evidence and documentation to show you have met the outputs and results definitions and you must be able to evidence that you have achieved these outputs when claiming your grant.*

**2.4 Added Value & Innovation**

**Please explain how your project is different from what is already provided in the Folkestone Community Works Programme area and will add value to the current offer and is innovative.**

*Please highlight the research/knowledge you have used to identify that your work will not duplicate any existing actions.*

|  |
| --- |
|  |

**2.5 Procurement:**

**Please demonstrate that you understand the procurement requirements and how you are going to manage this process.**

*Managing procurement correctly and ensuring that you retain the evidence to demonstrate this is extremely important for all ERDF projects.*

|  |
| --- |
|  |

**2.6 Target groups:**

**Please identify the target groups that will be the beneficiaries of this project.**

*Please describe the methodologies you will use to engage and work with the target groups during a sustained period of time.*

|  |
| --- |
|  |

**Please describe the experience of your organisation in working with the target groups.**

|  |
| --- |
|  |

**Please identify what proportion individuals, businesses or capital works will be from, in the areas of highest deprivation (20% decile area /20% most deprived LSOAs) within the Programme area.**

*Please describe any specific methodologies and activities that you will focus on in the most deprived areas, to support your output delivery.*

|  |
| --- |
|  |

**2.7 State Aid:**

**Please indicate the financial value and details of any type of public support you have received over the last 3 fiscal years.**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Funder** | **Name of funding source** | **Public funding**  **Y/N** | **Purpose of funding** | **Type of funding** (grant, loan etc) | **Date funding received** | **Amount**  **£/€** | **Was it classified as State Aid?**  **Y/N** (if yes, what was **Gross Grant Equivalent Value €** |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

**2.8 Understand Publicity Requirements:**

**Please set out below how you will meet the EU publicity requirements**

*All recipients of EDRF funding must meet the publicity requirements as set out in ERDF Branding and Publicity Requirements ESIF-GN-1-005, Version 8, Date published 1 August 2019. You are required to set out how you will meet the need to ensure all materials are correctly branded and confirm that this does not conflict with your organisations branding guidelines.*

|  |
| --- |
|  |

**2.9 Cross Cutting Themes**

**A. Sustainable Development:**

**Please show how you support sustainable development in your project. A project specific Sustainable Development Policy and Implementation Plan needs to be submitted with the application.**

|  |
| --- |
|  |

**B. Equality and Diversity:**

**Please show how you support equality and diversity within your project. A project specific equality policy and implementation plan needs to be submitted with the application.**

|  |
| --- |
|  |

**2.10 Experience and Capacity:**

**A. Delivering this type of project**

*Please highlight the experience you have in delivering this type of project including how successful you were in meeting the outputs, managing the associated evidencing and record keeping, and the resources you will use to deliver this project.*

|  |
| --- |
|  |

**B. Delivering EU funded projects**

*EU funded projects have a particular approach and methodology to funding so it would be helpful to know if you have delivered any EU funded projects in the past. If so, please could you note what these have been and the key lessons learned.*

|  |
| --- |
|  |

**2.11 Budget**

**You will be required to complete the Budget annex document, (please see C2.4b Main Project Grant Application - Budget Annex.xls) for the project funding. This annex will be included in your Grant Funding Agreement***.*

**Once the annex has been completed, please provide an overview of your budget below. All costs should be inclusive of VAT and must match the figures stated in your budget annex.**

|  |  |  |  |
| --- | --- | --- | --- |
|  |  |  |  |
| **ERDF** | **Match Funding** | **ERDF** | **TOTAL** |
| **Equipment (capital costs)** |  |  |  |
| **Other Capital** |  |  |  |
| **Building and Construction** |  |  |  |
| **Salaries** |  |  |  |
| **Overheads (salaries)** |  |  |  |
| **Marketing** |  |  |  |
| **Professional fees** |  |  |  |
| **Consultancy** |  |  |  |
| **Office costs** |  |  |  |
| **Rent** |  |  |  |
| **Other revenue** |  |  |  |
|  |  |  |  |
| **Total** |  |  |  |
| **%** |  |  |  |
|  |  |  |  |

**2.12 Financial Assessment**

**Provide full details of how you have estimated the costs. For capital projects, please also provide details of the quotations received: amount, “supplier” and date.**

|  |
| --- |
|  |

**For Capital projects, forecast the end value of the asset and explain how you have estimated this figure.**

|  |
| --- |
|  |

**Will the project or any of its assets be owned by an organisation other than the Applicant?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  |  |  | No |  |  |

If ‘Yes’ please describe the arrangements that will be made to ensure that the grant will be used only for the purposes stipulated in the Grant Funding Agreement, if this application is approved.

|  |
| --- |
|  |

**Please provide summary figures from your last 3 sets of audited accounts below.**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **Financial Year End (last set of audited accounts e.g.1 March 2016 – 30 April 2017)** | | | |
|  | **2015** | **2016** | **2017** | **2018** |
| 1. Commercial revenues |  |  |  |  |
| 2. Grants or similar |  |  |  |  |
| 3. Total turnover (1+2) |  |  |  |  |
| Gross profit |  |  |  |  |
| Operating profit **before** Directors remuneration, interest and tax \*\* |  |  |  |  |
| Operating profit **after** Directors remuneration and dividends to Directors |  |  |  |  |
| Shareholder’s funds at year end |  |  |  |  |
|  | *\*\*Please note that if your organisation operates through a group structure please aggregate the results and include a note of all the trading companies included in the figures* | | | |

**2.13 Funding Status**

Is your company registered or about to be registered for the purposes of Value Added Tax?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  |  |  | No |  |  |

|  |  |
| --- | --- |
| If ‘**Yes**’ please give us your VAT registration number. |  |

***Note: all businesses VAT registered will be expected to recover their VAT and your grant will be calculated on net expenditure (exclusive of VAT). If at any time the organisation registers/deregisters for VAT please inform the Programme Manager Immediately. Please seek advice from a VAT advisor if required.***

**2.14 Previous Public Funding**

Has this business previously received any public funding or publically-funded support?

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  |  |  | No |  |  |

If ‘**Yes**’ please advise the **purpose**, **project reference number (if any),**  **amount**(s) and **date**(s) awarded.

|  |  |  |  |
| --- | --- | --- | --- |
| **Purpose** | **Project reference No.** | **Amount** | **Date funding/support received** |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |

**2.15 Project Match Funding**

Please indicate the **amount** and **source** of the match funding for this project and the **date of** **availability** of these funds

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Amount**  **£/€** | **Source** | **Public Funding**  **Y/N** | **Date of availability** | **Does this constitute State Aid?**  **Y/N** |
|  |  |  |  |  |
|  |  |  |  |  |

Please detail any **conditions** attached to **match** **funding** for the project. *Where possible please provide copies of offer letters/emails.*

**What will you do if the match funding for the project is not approved?**

|  |
| --- |
|  |

What other funding sources have you approached and what was the outcome?

|  |
| --- |
|  |

|  |  |  |
| --- | --- | --- |
| **3** |  | **RISK MANAGEMENT AND BUSINESS PLANNING** |

**3.1 Risk Assessment**

*Please note there are ALWAYS risks to consider, for example; supplier delays, failure to recruit, staff and volunteers illness, lack of demand etc.*

**Please set out the main risks associated with the Project, the seriousness of the risk, probability of occurrence, contingency plans to deal with each risk and the level of mitigated risk as a result of the contingency planning**.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Risk** | **Seriousness of risk1** | **Probability of occurrence1** | **Contingency plans2** | **Mitigated risk1** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

1 High, Medium, Low

2 How do you propose to manage the risks?

**Please indicate how the projects meet all necessary guidance and legislation. For example, health and safety regulations, etc.**

|  |
| --- |
|  |

**Do you need any statutory consent to deliver this project? For example planning permission/listed building consent etc.?**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| Yes |  |  |  | No |  |  |

If ‘**Yes**’ have you obtained all the necessary consents, attach a copy of the permission and any conditions.

|  |
| --- |
|  |

**3.2 Legacy: Action 3.8 requirement**

**Please explain how your project will have a viable future after the grant funding ends.**

*Please highlight the research/knowledge you have used to identify your project will have a legacy beyond the grant funding.*

|  |
| --- |
|  |

**Please submit a 5 year business plan for your project with the Action 3.8 application form.**

|  |  |  |
| --- | --- | --- |
| **4** |  | **DECLARATION BY APPLICANT** |

* I declare that to the best of my knowledge and belief, the information given on this application form and in any supporting material is correct and that I am authorised to make this application on behalf of the Organisation
* I understand that acceptance of this application by The Programme does not in any way signify that the project is eligible for assistance from the ERDF Programme or will receive grant aid.
* I understand and accept that the information contained in this document may also be shared with the project partners.
* If information changes in any way I will inform promptly.
* If the application is successful we agree to work with the Programme Management Team before any press release is made and ensure that the PMT is involved in any responses by us to approaches made by the press regarding the project in order to ensure that any publicity recognises the contribution the Folkestone Community Works programme has made.
* We understand that the Programme Management Team may withdraw all or part of the grant at its discretion as set out in the Protocols.

|  |  |
| --- | --- |
| **Signed** |  |
| **Name (please print)** |  |
| **Position** |  |
| **Date** |  |

***Data Protection Act: The information you give us will be held by the Folkestone Community Works Programme Team and will be used to assess your application. The main recipient of the information is the Folkestone Community Works Programme but it may also be shared with other Government agencies, which are entitled to this information under applicable legislation.***

|  |  |  |  |
| --- | --- | --- | --- |
| ***Checklist of attachments with this application*** | | | |
| ***Quotes*** |  | ***Project Equality and Diversity Policy and Implementation Plan*** |  |
| ***Audited Accounts*** |  | ***5 year Business Plan for the project: Action 2.7 only*** |  |
| ***Planning Permission & Attached Conditions (if applicable)*** |  | ***Details of any other grants received*** |  |
| ***Sustainable Development Policy and Implementation Plan*** |  | ***Other documents (please specify)*** |  |

### Please email completed application form and send attachments to:

### [**folkestonecommunityworks@folkestone-hythe.gov.uk**](mailto:folkestonecommunityworks@folkestone-hythe.gov.uk)

### or post to:

### **Programme Manager, Folkestone Community Works, Folkestone & Hythe District Council,**

### **Castle Hill Avenue, Folkestone, Kent CT20 2QY**