

**SECTION 137 GRANT APPLICATION FORM**



PLEASE COMPLETE IN BLOCK CAPITALS USING BLACK INK

**PART 1**

Name of organisation			
Type of organisation		Registered charity no (if applicable)	
Total no. of members		No. of members who live in the parish	
Contact name		Position in organisation	
Contact address			
Telephone number		Email address	
Website			
What are the objectives of the organisation?			

**PART 2**

Please outline details of the project for which you are seeking funding from the Council (continue on a separate sheet if necessary)	
Total cost of the project (please indicate if estimated)	£
Date scheduled to commence and complete	
Funding already secured	£
Amount expected to be secured by commencement	£
If you have applied for other grants towards this project, please list them below	
Name of body:	Amount applied for:
	£
	£
	£
How much are you requesting from Killamarsh Parish Council? <i>(Please note that the maximum grant is £200)</i>	£
What will be the benefit to the parish/parishioners of Killamarsh on completion of the project?	
If the Parish Council is unable to grant funding for this project, or grant anything other than the full amount requested, will the project still go ahead? If necessary add notes below	YES / NO

## DECLARATION

On behalf of our organisation: (Please tick)

We have read and understood fully the terms and criteria for making a S.137 grant application to Killamarsh Parish Council	
We have provided a copy of our organisation's constitution	
We have provided a copy of the most recent audited annual accounts	
We have provided a copy of our most recent bank statement	
We agree to provide copies, to the Parish Council, of all receipts for transactions that have been made with the grant monies awarded.	
We agree that any publicity that is given to our project, our organisation will acknowledge the grant that has been awarded by Killamarsh Parish Council.	
We agree to attend the Annual Parish meeting to present a report to council on benefits of the grant	

I submit this application on behalf of the stated organisation and believe, to the best of my knowledge, all statements made to be true and accurate.

Signed on behalf of (name of organisation)	
Signed	
Printed	
Date:	

When completed, please return this form to:

The Parish Clerk  
Killamarsh Parish Council  
Killamarsh Sports Centre  
Stanley Street  
Killamarsh  
S21 1EL

**Killamarsh**  
PARISH COUNCIL

### FOR OFFICE USE ONLY

Date application received	
Application reference number	
Received copy of applicant constitution	
Received copy of most recent audited accounts	
Received copy of most recent bank statement	
Date of S.137 Committee meeting	
Recommendation of the S.137 Committee	
Date and minute number of FPC meeting	
Approved	YES / NO
Amount of grant	£
Cheque number	
Date cheque sent	
Date of written confirmation of cheque receipt	
Received copies of receipted invoices	YES / NO
Were there any funds unused and therefore returned?	YES / NO
Amount returned (if applicable)	£