SECTION A – Your Organisation

1. Name of organisation

Type of organisation (i.e. Registered charity, Charitable Incorporated Organisation, Community Interest Company, Town/ Community Council, unincorporated association etc.)

Charity number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Company number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(if relevant)

Organisation Address (please include postcode)

Contact name and position in organisation

Contact telephone number(s) (please include area code)

E-mail address

How your information will be used:

In line with PAVS’ Privacy Policy (<https://www.pavs.org.uk/contact-us/privacy-policy/>) the information collected as part of this application process will be held in a central database of voluntary organisations.  The details supplied on the application form are viewed by the assessment panel for this fund and shared as part of our partnership working to deliver this scheme. Details of funded projects may be published by PAVS and the Port of Milford Haven. No personal contact details will be published.

2. Please tell us about your Organisation’s aims and the main services/ activities you provide

3. How many people are involved with your Organisation?

a. Committee Members \_\_\_\_\_ Volunteers \_\_\_\_\_ Paid staff \_\_\_\_\_ Members \_\_\_\_\_

b. To comply with eligibility, we confirm that our organisation has three or more unrelated committee members/ directors Yes ☐ (Tick Box)

1. Please provide the following details for your bank account (full bank details will be requested with any offer letter to enable payment by BACS)

Bank/Building Society Name

Name of account

(N.B For clear accountability & to meet eligibility guidance for the Fund, the bank account name must match the name of the applicant organisation & your governing document). Sports Clubs, applying for up to £250 of funding, without a bank account in the group name are asked to get in touch to discuss a suitable alternative

SECTION B – Your Project

5. How much funding are you requesting from the Community Fund

£\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please ensure this is within the maximum amount stated.

(For sports clubs, not connected to the waterway, funding requests are capped at £250 for minor equipment or kit requests)

*Please Note: Individuals or organisations seeking raffle prizes or support can find more information here;* [*https://www.mhpa.co.uk/about/environment-society-and-governance/community/*](https://linkprotect.cudasvc.com/url?a=https%3a%2f%2fwww.mhpa.co.uk%2fabout%2fenvironment-society-and-governance%2fcommunity%2f&c=E,1,qL8Cx1FzmrGusk1WrCb0GEzAQcA_vTGFskcsoVb_0s_DlRSSXkACLUHsg_AX5X8MOJQowMcck2ZntOhtNveDl0Q7EnERDl7n5gt-Czt9UM2I5asoV9SKOQAPzQ,,&typo=1)

6. Please indicate which Theme/s you are applying to

1) Sustainable & resilient environment ☐

2) Safe, inclusive and enjoyable Milford Haven Waterway ☐

3) Vibrant & prosperous community ☐

7. Tell us how your project will contribute to the Theme/s selected

8. Please tell us about the project you are seeking funding for including the improvements you would make and activities you would provide

Please include;

• the project name.

• where it will take place

• the start and end date for the project\*\*

• tell us how your project aligns with any of the Port’s core values of safety, collaboration, excellence and sustainability

\*\*Please note: Project start dates must be at least 4 weeks after published application deadline dates

Project Costs

**9a**. Please provide a full breakdown of what you will do with the money. Give clear costings with exact figures. Please note that you must include three actual quotes for all items requested over the value of £1000.

This funding cannot be used for items that have already been purchased or will be purchased prior to receiving the funds. Please plan project spend at least 4 weeks after published application deadline dates.

|  |  |  |
| --- | --- | --- |
|  Item of expenditure | Cost of item(inclusive of VAT where VAT cannot be recovered) | Amount requested from Community Fund |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| **TOTAL** | **£** | **£** |

**9b.** Tell us about any additional sources of funding (your own contribution or funding from other sources) for this project or purchase and whether this is confirmed.

|  |  |  |
| --- | --- | --- |
| Source of additional funding | Amount | Status (confirmed/ awaiting outcome) |
|  | £ |  |
|  | £ |  |
|  |  |  |
| **TOTAL** | **£** |

10. Can VAT be reclaimed on your project costs (please circle)? Yes or No

If yes, give your VAT registration no. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_and VAT will be

Non-claimable through this grant.

If you are not VAT registered, please ensure that costs of items listed are inclusive of VAT

11. If your project involves alterations to a building or land do you own or lease the building or land?

☐ Own ☐ Lease Period remaining\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(min of 10 years)

If you do not own or lease the land then the landowner must provide a letter of support stating commitment to the project for the next 5 years ☐ Letter provided

12. Projects requiring planning permission must have this in place. Please confirm this is in place or tick to tell us that it is not required.

|  |  |  |  |
| --- | --- | --- | --- |
| Yes (full) |  | Ref no.\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |
| We confirm that our project does not need planning permission |  |

13. Project beneficiaries

Who will benefit? How many people will benefit? What is this number based on?

14. Please tell us about the difference this project will make to its beneficiaries

15. How do you know that this project is needed and that the proposed project will help to meet this need?

|  |
| --- |
|  |

16. Please tell us how your project fits/ links with other community groups or partners working in your area (both geographic and community of interest).

|  |
| --- |
|  |

17. Energy Saving Projects only;

What are your anticipated savings per annum following the completion of your project. For projects

applying for LED lighting please request the template from PAVS to calculate this.

|  |
| --- |
|  |

18. Has your organisation previously received any funding from the Port of Milford Haven?

Yes No

Please provide date/s and value of any award:

19. DECLARATION – TO BE SIGNED BY ALL APPLICANTS

We declare that to the best of our knowledge and belief all the above information is correct, required consents, ownership/ leasing documents are held by this group and that in the event of a grant being awarded it will be used exclusively for the purposes specified, unless changes have been communicated to and approved with the Fund Administrator in conjunction with the Port of Milford Haven.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am an authorised representative

of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of organisation).

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ am an authorised representative

of: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Name of organisation).

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please provide signatures from two people in your organisation in support of this funding request. This can be given by the second signatory emailing development@pavs.org.uk to confirm their support of the Application, stating the name of the applicant group or alternatively you can print this page, sign it and send a photo image of the signatures with your application.

Application checklist

Before you submit your application form to PAVS please

* Answer all questions on the application form
* Include a full breakdown of costs
* Check that your finances add up
* Ask a 2nd representative of your group to sign your application form
* Attach 3 quotations for all items over £1,000
* Attach a copy of your governing document
* Attach any supporting documents i.e. copies of letters of support
* Contact PAVS Third Sector Support Team with any queries

**Email your application & supporting documents**

**by 12 noon on the deadline date to** **development@pavs.org.uk**