



Community Housing Grants Scheme

Application Form



DDC Community Housing Grants Scheme

Application Form

SECTION 1: Please provide some contact details.

This should be someone who will be able to answer any questions we may have about this application. It must be a current member of your group/organisation.

Organisation/Group name	
Name of main contact	
Position/Role	
Contact Address	
Telephone	
Email	



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Section 2: Tell us about your project

Please provide outline details about your project.

Please tell us which community led housing model most closely describes your project.

Where will your project take place?

Please provide the full address and postcode.

Why is your project needed?

What Community Housing Need is the project designed to address, and what evidence do you have that the need exists

How will your project benefit the community in the long term?

We will not fund projects that seek to build homes for sale at a profit. How will you ensure that the benefits delivered will be legally protected in perpetuity.



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Tell us about the Project Management experience of your group.

How many people are currently involved in your group? What are their roles? What skills do they have? Are you receiving project management or skills support from any other organisations or individuals?

How does the community feel about your project?

Have you carried out any consultation? What feedback have you received – opposing and supporting? How do you intend to find out the views of the community and keep them involved in the project?

What are the main risks and barriers to your project progressing?



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Section 3: Please provide details of the activities you are seeking grant support for

Please complete this table giving all the costs involved in your project as accurately as possible.

All costs must include VAT.

Level 1 Grant

Type of activity	Supplier	Cost	Start date	Completion date

Level 2 Grant

Type of activity	Supplier	Cost	Start date	Completion date



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How do you plan to fund the project in total?

Give details of any other funding you have identified, and how you will cover the shortfall

Description Item/s	Expected cost of item/s Please show pounds and pence £0.00
TOTAL	

Please list any other grant funding your organisation or group has received in the last 3 years

Name of Funder / Fund	Total amount Add "NIL" if none	When? Month/year	What was the funding awarded for?



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Section 4: Tell us about your organisation

What type of group/organisation are you?

Please tick all that apply

Registered Charity - Charity Number

Charitable Incorporated Organisation (CIO)

Community Interest Company (CIC)

Co-operative/Industrial & Provident Society (IPS)

Social Enterprise

Voluntary/Community Group

Church/Faith group

Part of [or related to] a larger organisation, Federation or National Charity - details

Other - details

Please provide the bank account details for your group

Name of Bank	
Account Name	
Account Number	
Sort Code	
Please Provide details of at least 2 signatories for this bank account	
Name of signatory 1	
Name of signatory 2	
Name of signatory 3	
Name of signatory 4	



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Does your group have any other bank accounts in its name?

☐ Yes

☐ No

Please tell us about your Management Committee

Name	Position/Role	Date elected to this role	Preferred contact details either phone or email
	Chair		
	Secretary		
	Treasurer		
	Vice chair		

What is the annual income of your organisation/group?

Please tick only one of the following boxes

Less than £5,000 per year

£5,000 - £10,000 per year

£10,000 – £25,000 per year

Over £25,000 per year



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In order to help target funds to where they are needed most we would like know a little more about the levels of free financial reserves your organisation has.

Type of financial reserve	Total value (£) at time of application
Restricted Funds (funds that may sit in the main bank account of the organisation but that can only be used for specified purposes. You may be asked to provide evidence of restriction on these funds such as formal minutes of meetings where decisions were taken to restrict them and/or notes of the annual accounts if your organisation has produces them)	
Unrestricted Funds	
TOTAL (sum of the above)	



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Section 5: The Declaration & Data Protection Statement

The Declaration

Please tick the boxes to confirm you have read, understood and agree to the following statements.

Both you and the Management Team/Committee of your organisation have read and understood the Eligibility Criteria for the DDC Community Housing Grants Scheme and have also read, understood and agree to the Terms and Conditions that apply to the DDC Community Housing Grants Scheme.

You are authorised to submit this application on behalf of the group/organisation who will receive any grant awarded.

You confirm that all of the information you have provided in relation to this application form is true and correct to the best of your knowledge.

That Dover District Council have permission to contact other grant providers about the project details contained in your application form, if required.