

## APPLICATION FORM FOR PLACE BASED INVESTMENT FUNDING FROM THE HIGHLAND COUNCIL 'Dingwall 800'

Appli	icant organisation:					
Proje	ect title:					
Project/event location (inc. postcode):						
Contact name:						
Applicant Address (inc. postcode):						
Email address:						
Contact telephone:						
Council Ward: (check guidance for link)						
,	the main contact have any c	communi	icatio	on needs? E.g., textphone, sign language	e, large	e print?
Yes					No	
What	type of organisation are you	<b>i?</b> (Please	tick a	ll that apply)		
Third Sector (voluntary or community) organisation		unity)		Community Council		
Registered Charity				<b>Company Limited by Guarantee</b>		
If yes – Registration number				If yes – Company Number		
Other - please specify						
	Ctart data of projects		1			1
	Start date of project:  End date of project:					
						1

**Project summary** – please provide a brief outline of your project and the outcomes it will deliver. For example:

- Aims of the project and how you are going to do it
- Help with running costs or for a specific project or activity?
- Who will benefit?
- How your project or activity will help the Council to meet its Public Sector Equality Duty
- How your project or activity will support the 800<sup>th</sup> anniversary of Dingwall being awarded Royal Burgh status in 1226?

Please note that the Council will be unable to provide any resources not specified on this form or supporting information.				
Please state a summary of outcomes from your project. (If applying for £1001 and over)				
1.				
2.				
3.				

Please provide a breal	kdown of how much your activities/project	t will cost	Amount (£)
listing the items red	Amount (£)		
	Total	Project Cost	
	Total Reques	sted Amount	
		1	
How will the project be tapplied to?)	funded? (What other organisations have you	Amount (£)	Confirme
	T. (15)		
	Total Requested Funding		
	Total Match Funding  Total Project Costs		
	Total Froject Gosts		
Your Bank Details:			
Name of Bank:			
Account Name:			
Account Number:			
Sort Code:			

<b>Checklist And Declaration -</b> To ensure that the Highland Council can consider your application, please tick boxes to show what you have enclosed. Please ensure that you have enclosed the following information:							
Externally verified Statement of Accounts as presented to your latest AGM  OR							
For new organisations which have been established less than 12 months, please give an estimate of first year's income and expenditure							
AND							
A copy of your organisation's last 3 months bank statements (for very new organisations a single bank statement will be sufficient)							
AND							
A copy of your organisation's constitution							
<b>Declaration:</b> We confirm that we are allowed to submit this application on behalf of	of:						
Name Of Organisation:							
We undertake to ensure that all the necessary enclosures are included, that the information is, to the best of our knowledge, accurate and that this application complies with the Highland Council's Conditions of Award. The data you have provided in the application and claim forms will be recorded on an electronic data base and are subject to the provisions of the Freedom of Information Act (Scotland) Act 2002, the Data Protection Act 1998.							
Please provide 2 signatures. Signatory 1 should be the Chairperson of the Organisation and signatory 2 should be the person who has filled out the form. If these two people are the same, signatory 2 should be another member of your organisation's committee.							
Signatory 1: Signator	y 2:						
Print Name:							
Signature:							
Date:							
Please confirm you have read and understood the Privacy							
Notice: <a href="https://eur02.safelinks.protection.outlook.com/?url=https://www.highla.com/">https://eur02.safelinks.protection.outlook.com/?url=https://www.highla.com/"url=https://www.highla.com/"</a>							
k/directory record/1487160/community regeneration funding&data=05 01 Paula.B hland.gov.uk 7ae961fb0d2749744e6b08da9b158758 89f0b56e6d164fe89dba176fa94	etts@hig						

ojpc6NJ3uGzi4vjMDvJM=&reserved=0**Yes** □ **No** □

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Please confirm you have read and understood the Funding Terms and Conditions:
Yes □ No □
Completed forms should be emailed to: Policy6@highland.gov.uk