**Application Form for Legacy Funding**

1. Name of Church, Congregation or other body applying:...................................................................

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2. Location of proposed project:.............................................................................................................

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3. Name of contact:.................................................................................................................................

Capacity in which acting:...................................................................................................................

Full postal address:.............................................................................................................................

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Telephone No:.............................................Email..............................................................................

*(to whom queries for clarification can be directed)*

4. Brief description of the proposed project, including how the project will be organised : ...........................................................................................................................................................

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5. Does this require the redevelopment of existing premises or new building? Yes No

If so, is this likely to require (a) Planning Permission and/or (b) Listed Building consent?

6. Does the proposed project require the employment of staff? Yes No

If so, please give details and cost, including employer’s on costs:....................................................

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7. The total sum being applied for: £ (over what period?) *N.B. Maximum period is 3 years*

8. What % is this of the presumed total costs?:......................................................................................

9. What other sources of funding will be required?:..............................................................................

10. Are there funds already available to be used towards this? Yes No

If so, give full details..........................................................................................................................

11. Will the funding be required to initiate the project (i.e. capital costs) and/or sustain it over a period (i.e. running costs, including salaries and other recurring costs)? Yes No

12. [If appropriate] please confirm that this application has (as required) the support of the relevant Church Meeting, Area Partnership and Synod. [If not, why not?] Please enclose a copy of the relevant Minutes.

13. Does this application have an ecumenical dimension? Yes No

If so, how are the relevant churches supportive? …..………………………………………………

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14. Is this development intended to enhance or supplement Local Authority services in the area? Yes No

If so, to what extent has the Local Authority indicated their likely support?....................................

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15. Please enclose copies of the last two years inspected Accounts for the proposing entity, or full financial information and reasons why accounts are not available.