

**BEQUEST OF THOMAS OLIVER**

Registered Charity No. 1106365



Secretary: Town Clerk

The Bay Villa Trust, Council Offices, Main Street, Grange-over-Sands, Cumbria, LA11 6DP

Tel: (015395) 32375 Email: [council@grangeoversands.net](mailto:council@grangeoversands.net)

### **The Bay Villa Trust Grant Making Policy**

The Bay Villa Trust is a small grant-making trust supporting general charitable purposes for the public benefit of the inhabitants of Grange-over-Sands.

The Trustees prioritise applications that are:

- From individuals, organisations and groups in the parish of Grange-over-Sands.
- From organisations and groups who support the inhabitants of Grange-over-Sands which are not based in the parish of Grange-over-Sands such as Cartmel Priory School, youth organisations or rescue services.

Organisations may only receive grants once every two years. The year for the Trust runs October – October. A limit of £1,000 per applicant has been set by the Trustees.

All applicants must complete the following grant application form. The Trustees generally meet twice annually to review applications, in April and November. At these meetings, having reviewed all applications received in the previous months, the Trustees approve the grants to be made to the successful applicants. All successful applicants will be notified. Payment is then made, by cheque, in the following month. The decision and grant awarded will be recorded and filed with the Trusts accounts and recorded in the minutes.

#### **Privacy**

*The Bay Villa Trust is administered by Grange-over-Sands Town Council. The Town Council will only use any information that you give us to provide services that you request.*

*For more information see our Privacy Notice: [www.grangeoversandstowncouncil.gov.uk](http://www.grangeoversandstowncouncil.gov.uk)*

**The Bay Villa Trust  
GRANT APPLICATION FORM**

**A. Your Organisation** Please give the following information about your organisation:

Name of Organisation:

Address:

Postcode:

**B. Contact Details**

Name and position of contact:

Address for correspondence (if different from above):

Postcode :

Telephone :

Email:

**C. Your Application**

Brief description of project or scheme for which grant is requested:

Who will benefit from the proposed project or scheme and how many of these are residents?

Total cost of project or scheme: £..... d) How much are you applying for? £.....

Please give a breakdown of the proposed expenditure for this grant request:

If the total cost of the project is more than the grant, how will the residue be financed?

**D. Your Financial Situation**

All applications must be accompanied by the following financial information: **If you do not supply this information your application will not be considered unless previously agreed in writing by the Trustees.**

- A copy of your latest approved statement of income and expenditure or other financial report which indicates your financial position, or
- Photocopy of bank statements covering the past six months.

**If you are unable to supply this information, please contact the Trust for advice before submitting this application.**

Please also supply your bank account full name so that the grant can be paid to you by cheque in the event of your application being successful:

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**Signed:** .....

**Print name:** .....

**Date:** .....

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**For Office use only:**

Date of Meeting application considered:

Approved Amount/Rejected:

Minute No:

Cheque No. & Date sent