

HONITON TOWN COUNCIL APPLICATION FOR GRANT

Please send completed application to:

Honiton Town Council The Beehive Dowell Street Honiton, EX14 1LZ

(To be returned no later than 5.00 pm on 30th June 2025 either by hard copy or email to towncouncil@honiton.gov.uk))

1.	Name of Organisation						
2.	Address						
3.	Name of Contact and position in Organisation						
4.	Contact Telephone number						
5.	Email address						
6.	Status of organisation	Voluntary	Limited Company		Registered Charity	Other (please describe)	
	(Please select)	Community Organisation	Со-о	perativ	'e	Charity Number	
7.	Which one of the	Sport					
	following best fits	Arts					
	your groups area of interest	Health					
		Green					
		Youth					
8.	Date of formation						
9.	Do you have a man	agement com	mittee		YE	S/NO	







10.	Where in Honiton do your activities take place?	
11.	Please describe the services/activities you offer.	
12.	How does the local community benefit from the services/activities?	
13.	What has your organisation achieved in the last year?	







14.	What does your organisation plan to achieve in the next year?	
15.	What project/activity will the grant be used for?	
16.	When will it be started/finished	
17.	What is the total cost of the project?	
18.	How much are you requesting from Honiton Town Council?	
19.	How much have you already raised?	
20.	Is this Grant for Match Funding?	
21.	Where else have you applied for Grants?	







22.	The Council is looking towards projects that support the following areas: Young people/ Health and Well Being / the environment and Town regeneration. Please outline which of these areas your project is addressing. (500 words maximum)







23.	_	w about who you are working with and the long-term se answer the following questions
24.	How many people will this project benefit	
25.	How many are involved in decision-making and ownership of this project?	
26.	Will your project encourage more Honiton residents to get involved?	
27.	Are you partnering with other Honiton groups and, if not, could you consider doing so?	
28.	We want to know how you will be sure your project is successful. What will you be measuring and how will you measure it?	
29.	Will your project continue after this grant is spent? If so, how will it be funded?	
30.	Have you had a grant from the council in the past? If so when, how much for, what was the grant for and was the project a success	







Declaration

We confirm that all the information contained within this application is true and accurate to the best of our knowledge and belief, and that we are authorised to submit this application on behalf of the group. We have read and agree to abide by the terms and conditions (please click/tick box to agree)			
We have provided copies of the following necessary documents (refer to Grant Application			
Information) to support the application (please click/tick	as appropriate).		
Accounts			
NB. Scanned copies are acceptable if you send your application by email. Applications will not be taken to committee without all these supporting documents			
Signature 1 (person submitting form)			
Signature 2 (Chair or senior representative of the organisation)			
Typed entries acceptable for email applications			
Date:			



