TOLLER PORCORUM PARISH COUNCIL

TOLLER PORCORUM PARISH COUNCIL GRANT AID APPLICATION FORM

The information provided on this form will NOT be treated as confidential as it will be discussed in a public meeting. The applicant may request confidentiality upon application stating a valid reason. If confidentiality is requested the Council will decide if this can be granted (taking account of the relevant legislation) and inform the applicant accordingly. If confidentiality is not granted the applicant will be asked to confirm whether it wishes to proceed on that basis.

Where the application is successful the Council may, from time to time, wish to process this information (as updated) for administration purposes. Where this happens, processing, whether by computer or otherwise, will take place in accordance with the Data Protection Act. By signing this form, you will be providing the Council with your consent to these uses.

Name of organisation: TOLLERPORCORUM VILLAGE ASSOC
Title (Mr/Mrs/Ms):
First Name: Last Name:
Position in organisation: REASURER
Address including post code:
Tel No:
Email address:
Are you or any members of your organisation related to any elected member or employee of the Council? If so, please give details:
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Purpose/aims and activities of the organisation:
POST OFFICE UPKEEN
Size of organisation/number of members: 3
Purpose for which the grant is required (please include details on who will benefit from the project or scheme requiring funding):
PART PAYMENT FOR PUBLIC LIABILITY
AND CONTENTS INSURANCE

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Total cost of the project or scheme requiring funding: \(\frac{300}{} \)
Other fundraising activities including other grant applications:
Amount of grant applied for: \$180
Account of activities over the previous year:
Account of plans for forthcoming year:
If your organisation works with children, young people under the age of 18 or vulnerable adults, does it have appropriate safeguarding and related policies in place?
Additional information (anything you consider relevant or helpful to this application):
Declaration:
I declare that to the best of my knowledge and belief, all particulars and information provided in this document are correct and complete. I understand that any false declaration or misleading information or any significant omission may result in the rejection of the application or repayment of any grant aid subsequently provided.
Signed: 20.8.25

Return this form to the Clerk of Toller Porcorum Parish Council, c/o 3 The Briars, Wool, Wareham, Dorset BH20 6NA or clerk@tollerporcorumparish.org