

HISTORIC CHESHIRE CHURCHES PRESERVATION TRUST

Grant Application Form

All relevant questions must be answered.
Applications may be returned if parts are illegible

FOR HCCPT USE ONLY	
Date received	_____
Date to Trustees	_____
Date to ENTRUST	_____
Grant Approved £	_____
Agreement recd	_____
Third Party recd	_____

1. Building for which grant aid is sought see note 1.1 – 1.4

Project title Value of grant applied for

..... £.....

1.1 Name/ Dedication of Church/Chapel.

1.2 Address of building (include post code).

1.3 Is the building listed? YES/NO

If YES, please tick Grade and forward a copy of the listing. I, II*, II, A, B, C

1.4 Is the building in a Conservation Area? YES/NO

If YES, please give the name of Conservation Area:

2. Application/body making this application (see notes 2.1 – 2.4)

2.1 Denomination

2.2 Are you registered with ENTRUST as an Environmental Body YES/NO

If YES please give your enrolment number:

2.3 Person/body initiating the intended repairs (e.g. PCC etc).

2.4 Name, address and daytime telephone number of the person/agent making this application (this should also be the person to act as point of liaison).

3. Architect/surveyor (see note 3.1)

3.1 Name, qualifications, address & telephone number.

4. Summary of project (see notes 4.1 – 4.4)

4.1 Brief description of the total works to be carried out: include any relevant historical background information.

4.2 Details of the work for which the grant is sought if forming only a part of 4.1 above.

4.3.1 Name of the landfill site in the locality. You must provide a copy of an ordnance survey map showing both the landfill site and the site of the church/chapel for which the grant is being sought.

4.4 How will you seek to ensure that appropriate publicity is generated for the HCCPT and WREN? Please supply details in a separate statement.

5. Resources and funding (see notes 5.1 – 5.8)

5.1 Total cost of the project including VAT status. £.....

5.2 Amount of grant aid being sought from HCCPT. £.....

5.3 Fund raising. Summarise your plans for money for the work listed in 5.1 above and itemise any other grants which been applied for.

5.4 Where do you expect to secure Third Party Funding for the 11% reimbursement? Please supply details in a separate statement.

5. Resources and funding (see notes 5.1 – 5.8) - (continued)

5.5 Recent work on the church/chapel. Please give a brief description of the work and sums spent over the previous FIVE years.

5.6 Approximate numbers regularly attending usual Sunday services.

5.7 Provide a separate statement setting out the benefits of the completed project to the members of the church/chapel, the local community and the built environment.

5.8 Has your church/chapel participated in the HCCPT's Annual Ride and Stride event within the last FIVE years? YES/NO

6. Project management (see notes 6.1 – 6.7)

6.1 Please give details and dates of any necessary planning approvals, listed building consents and approvals from the parent body (i.e. for Anglican churches the date of the Faculty, for Methodist chapels the approval of the Circuit or Division etc).

6.2 Please supply a site plan clearly showing the location of the building and its curtilage.

6.3 Please supply a copy of the full specification for the work to be carried out. Please note that builders' or contractors' estimates will not be considered in lieu of a specification.

6.4 Please supply copies of at least two estimates for the work to be carried out.

6.5 Is the architect providing a full supervisory service including submission of interim/final certificates for the work? YES/NO

6.6 Fees – what percentage will the work be charged at?

6.7 What is the proposed project timetable?

ANTICIPATED START DATE

ANTICIPATED COMPLETION DATE

If not known, likely duration of works

7. Authorisation and certification

The completed form should be signed below, as indicated, by the applicant(s) or other person(s) authorised by the applying body.

On behalf of

I/We apply for a grant of £

In respect of the expenditure to be incurred in this application.

I/We confirm that the information provided above is to my/our best knowledge true and complete and confirm that I/we will sign an agreement confirming correct use of the funds.

I/We also undertake to make a payment of 11% of the value of any grant made under this application as a condition of that agreement.

I/We confirm that all the following documents are included with this application (tick each)

- | | |
|---|--|
| <input type="checkbox"/> 1.3 Listing description | <input type="checkbox"/> 6.1 Copy of all necessary approvals |
| <input type="checkbox"/> 4.3 Landfill site location | <input type="checkbox"/> 6.2 Plan of site & cartilage |
| <input type="checkbox"/> 4.4 Publicity details | <input type="checkbox"/> 6.3 Full specifications for works |
| <input type="checkbox"/> 5.4 Third party 11% confirmation | |

Name _____ Position _____

Signature _____ Date _____

Name _____ Position _____

Signature _____ Date _____

8. Payment details

Please provide Bank Account details _____

Name and address of Bank _____

Account Title and Account Number _____

Sort Code Number _____

Please return to:- J.Graham Clarke FCA
The Red Lodge
Parkgate Road
Mollington Chester CH1 6NE
Phone: 07775 575 564