



**MALTON TOWN COUNCIL  
Grant Scheme Application form**

<b>Name of group:</b>	
Main group contact: (full name and title)	
Position in group	
Address	
Telephone	
Email	
Website	
Provide a <ul style="list-style-type: none"> <li>• detailed description of the project</li> <li>• evidence of the need for your project,</li> <li>• and show who will benefit from it</li> </ul>	
What are the full costs of the project (including VAT if applicable)	
Provide match funding information (i.e. funder name and the amount you expect from them)	Funder ..... £.....  Funder ..... £.....  Funder ..... £.....

Please tell us the stage at which your other applications are at, ie just applied, awaiting outcome of application or funding confirmed.	
What contribution to these costs would you like from the Town Council?	£ ..... Maximum amount £250 (except in exceptional circumstances)
Is this contribution for a specific element of the project?	
What is the structure of your organisation?	Community Group <input type="checkbox"/> Registered charity <input type="checkbox"/> Other <input type="checkbox"/> Please give details below  .....

<b>SUPPORTING INFORMATION CHECKLIST</b>	<b>Tick to confirm enclosure</b>
Group constitution or set of rules	
3 months copies of statements from <b>ALL Bank accounts and statements of monies held in funds</b>	
Copy of the most recent/audited accounts	
Evidence of planning permission (if necessary)	
Quotes for capital items and works over £500	

*Please return to:*

Gail Cook, Town Clerk

Malton Town Council, Community House, Wentworth Street, Malton, YO17 7BN by **Thursday 30<sup>st</sup> August 2018**

Tel: 01653 228699

Email: [clerk@malton-tc.gov.uk](mailto:clerk@malton-tc.gov.uk)

[www.malton-tc.gov.uk](http://www.malton-tc.gov.uk)