

Lowestoft Town Council Grant Awarding Policy

Grant Application Form

Please complete this form and send it with:

- a. Your Equality Policy, or equivalent (and Safeguarding Policy if project relates to young and/or vulnerable people)
- b. Your constitution or equivalent

to The Town Clerk, Lowestoft Town Council, First Floor, Hamilton House, Battery Green Road, Lowestoft, Suffolk, NR32 1DE or e-mail admin@lowestofttowncouncil.gov.uk

Name of organisation	The Lowestoft Players Limited	
Name of account to which payment to be made (explain if not your organisation's name)	As above	
What does your organisation do? (100 words max)	Amateur theatre group	
What relevant local area does your organisation cover?	Lowestoft and the surrounding area	
Who are the main beneficiaries of your work?	Residents and visitors to the town	
Are you a charity? If yes, describe the type of charity	A charitable company set up to promote, improve, develop & maintain the education and appreciation in music & the theatre for the benefit of the local community and its surrounding area	
If registered, what is the charity number?	1130421	
Not-for-profit? If no, describe the organisation	Yes	
Organisation income (last complete financial year)	£113,893 per July 2022 accounts, accounts for 2023 have yet to be prepared	
Organisation expenditure (last complete financial year)	£92,827 per July 2022 accounts, accounts for 2023 have yet to be prepared	



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Contact details	
Name	
Address	
Telephone number/s	
E-mail	
Position within organisation	Finance Assistant
Explain how you are authorised to make this application on behalf of the organisation	Authorised by the board of directors to make grant applications on behalf of the organisation
About your project	
Please provide details of the project and how the project will benefit the people of Lowestoft (250 words max).	To instal a defibrillator for public use on the outside wall of the theatre, which is situated on Battery Green Road. Whilst there are other defibrillators situated in the town, this would benefit not only those using the Players Theatre but is also in close proximity to the bingo hall and the Marina Theatre both of which are in regular use.
Total cost of project	£1,500 plus VAT
Breakdown of cost	Equipment costs £1,500 plus VAT – details are on the website www.defibgrant.co.uk Installation and ongoing running costs will be covered by the Lowestoft Players.
Grant requested from Lowestoft Town Council	£750 plus VAT making a total of £900.
What specifically would the grant from the Council fund?	50% of the cost of the defibrillator unit.
Have any funds been requested/agreed from other	The other 50% of the cost would be payable by the Department of Health & Social Care Community Defibrillator Scheme who provide



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sources? Provide details	the equipment.	
When are the funds required?	As soon as possible please – we need to confirm order to apply for the equipment, which is offere first served basis.	d on a first come
Project start date	December 2023	
Project completion date	January 2024	
Compliance Agreements (insert intend to comply, insert 'NO'.)	'YES' to indicate your agreement to the questions	below. If you do no
Do you authorise us to hold and purpose of processing and mon	I use information that you have provided, for the itoring this grant application? You can ask us for see for this purpose at any time.	Yes
details of the information we use for this purpose at any time. Do you acknowledge that if you provide false or misleading information in your application or at any point in the life of any grant, we will provide information to relevant enforcement agencies and take any action to recover any funds and		Yes
damages, as we deem appropri Do you authorise us to use info part of our publicity and promo	rmation about your project and organisation as	Yes
Do you agree to acknowledge th	he Council appropriately on all of your related rial including posters, advertisements, press	Yes
Do you agree not to distribute f than as agreed as part of the gra	unds granted to any other organisation, other	Yes
Do you agree to report the outcrequired in the Council's Grant	come and impact of the grant to the Council as	Yes
Do you agree that any grant aw it was given and in compliance	Yes	

Signed	
(Signatory must be authorised to act	on behalf of the organisation and, if different from the main
contact listed above, this should be e	xplained.