



LICHFIELD CITY COUNCIL

Grant Application Form

Applications are accepted only from organisations that benefit Lichfield City residents.

- Organisations should ideally have been in existence for at least 12 months.
- This form should be used both for the main annual grant funding programme, and for applications for funding that may become available throughout the year.
- To apply for reduced rate/free use of LCC facilities, please contact the Council.
- For more information, contact administration@lichfield.gov.uk.

1. Contact Details

Name of Organisation

Contact Name

Position

Address
(including postcode)

Telephone Number

Email Address





LICHFIELD CITY COUNCIL

2. About your Organisation

Briefly describe the role of your organisation and the work it undertakes for the benefit of the residents of the City of Lichfield.
(Maximum of 400 words)





LICHFIELD CITY COUNCIL

3. Membership and Community Impact

How many residents of Lichfield City are members of your organisation?

Approxiamately how many citizens of Lichfield City benefit directly from the services of your organisation?

4. City Council Priorities

Particular weight will be given to applications that demonstrate one or more of the council's priorities. Please indicate which (if any) of the priorities your application meets and provide brief explanation(s) in the box that follows.

(i) Address issues around the cost-of-living crisis

☐

(ii) Tackle climate change and support actions towards achieving net zero

☐

(iii) Promote inclusivity across the city (e.g. benefit disadvantaged and marginalised groups, or those suffering from isolation, such as older people)

☐

(iv) Support and meet the needs of young people

☐

(v) Promote the cultural and creative life of the city

☐



LICHFIELD CITY COUNCIL

5. Your Grant Request

What is the amount of the grant requested? £

Tell us about the grant you are seeking. Please provide itemised and specific information, with financial details of the proposed scheme and/or funding requirement.





LICHFIELD CITY COUNCIL

5. Your Grant Request continued...

Do you pay a subscription or franchise fee to a higher body outside Lichfield?

If Yes, please provide details of the Higher Body together with the annual amount paid.

**Please give details of any grants received from other sources in the past 2 years
(date and amount of grant)**

Where did you find out about the grants available from the City Council?



**LICHFIELD CITY COUNCIL****6. Financial Details**

Please supply details of the bank account to which any grant should be paid.

Account Name:

Sort Code:

Account Number:

7. Financial Summary

All applicants must complete this section to provide a short financial statement of their organisation's accounts, which includes details of all balances held.

Please do not submit audited accounts.

Receipts and Payments for the year ending:

RECEIPTS	Amount	PAYMENTS	Amount
Subscriptions		Employees	
Donations		Professional Fees	
Grant Aid		Volunteers' Expenses	
Fundraising Events (give details)		Energy Charges	
		Rent/Rates	
		Equipment	
		Telephone/Postage	
		Insurance	
Other (give details)		Other (give details)	
1. TOTAL RECEIPTS		4. TOTAL PAYMENTS	
2. Opening Balance at:		5. Closing Balance at:	
3. Total of box 1 + 2		6. Total of box 4 + 5	

Note:

The total in box 3 should be the same as the total in box 6.

The date given in box 5 should be the same as the date for the 'year ending' as detailed above



LICHFIELD CITY COUNCIL

8. Grant Award Policy

A copy of the Grant Award Policy can be obtained by email to administration@lichfield.gov.uk or downloaded from our website.

Please tick to confirm you have read the policy

☐

9. Declaration

I declare that the information given on this application form is true to the best of my knowledge and belief.

Signed*

Position in Organisation

Date

*Electronic signatures are accepted

