

Sport Caerphilly

Facility Grant

Application Form

2023-24



*PLEASE ANSWER ALL QUESTIONS, AND TICK APPROPRIATE BOXES WHERE NECESSARY -
INCOMPLETE FORMS CANNOT WILL NOT BE ABLE TO BE SUBMITTED*

***Mae'r cyhoeddiad hwn ar gael yn Gymraeg. Mae ar gael mewn ieithoedd a
fformatau eraill ar gais.***

***This publication is available in Welsh. It is available in other languages and
formats on request.***

* Required

Applicant Details

1. Club Name *

2. Name of Applicant *

3. Address of Applicant *

4. Post Code *

5. Name & Address of club name to which application refers (if different)

6. Role at Club *

7. Email *

8. Contact Number *

9. Applicant's preferred language *

English

Welsh

10. Website/Social Media Address *

11. Will this be your only operating address?

*

Yes

No

12. Please state other addresses *

13. Does the club have an interest/shareholding in any of the companies supplying quotes/estimates for the grant application? *

Yes

No

14. If Yes, Please give details *

15. Telephone Number *

16. Email Address *

Club Structure

17. What is the status of your business? *

- Partnership
- Limited Company
- Community Business (Not for Profit Organisation)
- Other

18. Club Registration Number *

19. VAT Registration Number (if applicable)

20. What is the main sport of your club? *

21. How many sections does your club run? *

Mens

Womens

Juniors

Vets

Tots

Other

Project Details

22. Please describe your proposed project? (4000 characters max) *

23. Please detail/list costs of your grant application *

24. Please go into detail on the expected outcomes you anticipate on being successful with the award of grant funding (4000 characters max) *

25. Please explain why you cannot fund the project from other funding sources or your own resources? *

26. Have you previously accessed any funding for this project? i.e. Sport Wales - Be Active Wales Fund (BAWF), other funding streams) *

27. What is the anticipated start date for delivering your project? *



28. What is the anticipated end date for delivering your project? *



29. What is the total project cost? (excl. VAT) *

30. Are you contributing any of your own funds to the grant? If so confirm amount *

Premises and Permissions

Please note that it is the responsibility of the Applicant to check and obtain, as required, any necessary permission, approvals or consents required under the Town and Country Planning Act or under Building Regulations.

31. Does the project incorporate buildings work *

Yes

No

32. Your interest in the property *

Freehold

Leasehold

Rented

Project Outputs

33. How many volunteers and coaches do you have at the club? *

34. How many participating males under 16? *

35. How many participating males under 16 have a disability and/or impairment? *

36. How many participating males under 16 are from a BME group or background? *

37. How many participating females under 16? *

38. How many participating females under 16 have a disability and/or impairment? *

39. How many participating females under 16 are from a BME group or background? *

40. How many participating males over 16? *

41. How many participating males over 16 have a disability and/or impairment? *

42. How many participating males over 16 are from a BME group or background? *

43. How many participating females over 16? *

44. How many participating females over 16 have a disability and/or impairment? *

45. How many participating females over 16 are from a BME group or background? *

46. How many social/ non participating members do you have? *

47. How many social/ non participating members have a disability and/or impairment? *

48. How many social/ non participating members are from a BME group or Background? *

Business Bank Details

This is required for grant payment

49. Name of Bank *

50. Address of Bank *

51. Bank Post Code *

52. Account Name *

53. Bank Sort Code *

54. Bank Account Number *

Second Signature Details

55. Full name

56. Date of Birth



57. Gender *

- Male
- Female
- Prefer Not to Say

58. Address *

59. Post Code *

60. Phone number *

61. Have you or any of the Partners/Directors/Co-owners ever been adjudged bankrupt or has a scheme of arrangement or composition been made with your creditors under the provision of the Bankruptcy Act? Have you or any of the Partners/Directors/Co-owners any outstanding County Court Judgements? *

Yes

No

62. Please provide full details *

63. Have you or any of the Partners/Directors/Co-owners ever been convicted of fraud or any other offence involving dishonesty? *

Yes

No

64. Please provide full details *

65. Have you or any of the Partners/Directors/Co-owners ever been a Director or substantial share holder in a company which ceased trading or has gone into liquidation or receivership or for which an administrator has been appointed? *

Yes

No

66. Please provide full details *

67. Do you or any of the Partners/Directors/Co-owners currently have any outstanding debts with Caerphilly County Borough Council? *

Yes

No

68. Please provide full details *

69. · I authorise the Council to make any enquiries necessary to verify any information needed to determine my/our application. The information provided in this application may also be shared with colleagues in other departments, Councils or other business support organisations in order to assess the application and the overall impact of the Sport facility grant scheme.

· I declare that all the information given on the form is correct, to the best of my knowledge, and that the giving of a false declaration may result in action by the Council against the signatory for recovery of the grant plus costs, charges and expenses relating thereto.

· I confirm that I have full power and authority to act on behalf of the business/organisation that is making this application. I have read and accept the guidance note for applicants (Part A of this form).

70. Name of person completing the application (person 1) *

71. Position within club (Person 1) *

72. Date of signature (Person 1) *

 

73. Name of 2nd signatory (person 2) *

74. Position within club (person 2) *

75. Date of Signature (person 2) *



76. Any information provided will be treated in the strictest confidence but may be stored on computer and is therefore subject to the provisions of the Data Protection Act 2018.

77. I agree the details of my business will be included in the Councils' Business Directory *

Yes

No

