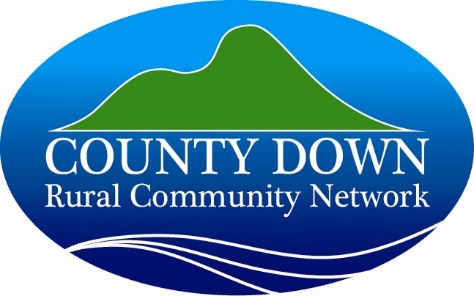
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**Rural Micro Capital Grant Scheme 2017**

**Application Form**

***Please ensure you have read the guidance notes before completing this application form and remember to keep a copy of the completed application form for your own records. Please do not alter the format of this form and use only the space provided.***

### Applications must be received by 4PM on Friday 29 September 2017

**Section 1: About your Organisation**

|  |  |  |  |
| --- | --- | --- | --- |
| **1.1** | **Name & Registered Address of Organisation**: | **Post Code:** | |
| **1.2** | **Name of Contact Person:**  (should be available to answer queries Monday-Friday) |  | |
| **1.3** | **Position held by Contact Person in Organisation:** |  | |
| **1.4** | **Correspondence Address**  (If different from 1.1 above) | **Post Code:** | |
| **1.5** | **E-mail address:**  (of Contact Person) |  | |
| **1.6** | **Phone Number:**  (of Contact Person) | **Landline** | **Mobile** |

**For Official Use only**

|  |  |  |  |
| --- | --- | --- | --- |
| **Date / Time Received:** |  | **Application Ref:** | **RMCGS 2017 -** |
| **Acknowledged by:** |  | **URN Number:** |  |

**Section 1: About your Organisation - Continued.**

|  |  |  |  |
| --- | --- | --- | --- |
| **1.7** | **If you have any particular communication needs, please tell us what they are.** | | |
| **1.8** | **Please outline the main aims, objectives and remit of your organisation.** | | |
| **1.9** | **Are you a not-for-profit, community voluntary organisation?** | **Yes\*** | **No\*** |
| **1.10** | **If you have a URN please enter it here:**  A Unique Reference Number (URN) is a reference number assigned by the Department for Communities (DfC) to organisations in the Community and Voluntary Sector as a means of recording all awards of grant funding made to an individual organisation. ( govfundingpublic.nics.gov.uk ) |  | |
| **1.11** | **Is your organisation VAT registered?** | **Yes\*** | **No\*** |
| **If yes, please enter your VAT registration number:** |  | |

## \*Please indicate as appropriate

## Section 2 - About your Project

|  |  |  |
| --- | --- | --- |
| **2.1** | **Project Title:** |  |
| **2.2** | **Project Description:** | |
| **2.3** | **Please describe how your project will contribute to reducing rural poverty and social isolation in your local community**.  DAERA is providing funding for this Scheme as part of its Tackling Rural Poverty & Social Isolation Framework (Refer to Annex 3 of the Guidance Notes for Applicants). | |
|  | |

|  |  |  |  |
| --- | --- | --- | --- |
| Section 2 - About your Project - continued | | | |
| **2.4** | **Which theme will the project principally focus on?**  (Please tick **only** one box, as most appropriate to your project) | | **√** |
| **Modernisation (of existing premises / assets)\*\*** | |  |
| **Information and Communication Technology** | |  |
| **Health and Well Being** | |  |
| **2.5** | **How many people are expected to benefit from your project?** | |  |
| **2.6** | **Have the item(s) for which you are now applying for funding already been purchased?** | **YES\*** | **NO\*** |

## \* Please indicate as appropriate

## \*\* Please refer to ‘What can be funded’ section on page 2 of the guidance notes

## Section 3 - Funding your Project

|  |  |  |  |
| --- | --- | --- | --- |
| **3.1** | **What is the estimated total cost of the project?**  Please provide a breakdown of the various items of the project, their estimated costs (based  on the lowest quotation) and the grant sought for each item. Please ensure that you  complete Annex A. NB: 2 written or internet search print-outs for each item **must** be  provided with your application and you are required to highlight the preferred quotation /  supplier. Further detail regarding quotes is included on Annex A. Note that second-hand  equipment is **not** eligible.  Continue on a separate sheet if necessary. | | |
| **ITEM(S)** | **Estimated Cost**  **£** | **Grant Sought**  **£** |
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| **TOTAL** |  |  |
| Section 3 - Funding your Project - Continued | | | |
| **3.2** | The Rural Micro Capital Grant Scheme 2017 can provide up to 85% of the total cost of your project, up to a maximum grant of £1,500. **NB The total project cost must not exceed £3,000.** Match funding must be in the form of a ‘cash’ contribution. Labour or ‘in-kind’ contributions **cannot** be accepted. Grants are payable **on completion** of your project. No advance payments are available. **This grant cannot be used to ‘match’ another funder’s project.**  Please give details below of how you intend to fund your project. | | |
| **Source of Funding** | **Amount £** | |
| Rural Micro Capital Grant Scheme 2017 |  | |
| Own resources |  | |
| **Total Cost of Project** | **£** | |
|  |  | |

|  |  |  |  |
| --- | --- | --- | --- |
| **3.3** | **Can this project be completed and grant claimed by 30 March 2018?**  Your organisation must complete the project, pay for all items and submit a claim by 30 March 2018. **NO** extensions will be permitted. | **YES\*** | **NO\*** |
| **Does your organisation have insurance?** | **YES\*** | **NO\*** |
| **If not, are you prepared to obtain appropriate insurance if awarded funding?** (Public / employers’ liability **and contents insurance** as appropriate) | **YES\*** | **NO\*** |

## \*Please indicate as appropriate

|  |  |  |
| --- | --- | --- |
| 3.4 | **Has your organisation received a rural micro-capital grant through any of the 3 previous phases?** | **Yes / No** |
| If yes, please list these below. |  |

## Section 4 - Additional Information

|  |  |
| --- | --- |
|  | **Please provide any other information which you consider relevant to your application and list any reports, etc. relating to you or your organisation and /or the project which you have enclosed.** |
|  |

**CHECKLIST**

|  |  |
| --- | --- |
| **Please ensure you have:** | **√** |
| Filled in all parts of the form, including Annex A. (Last page of this application form) |  |
| Provided contact details where we can contact you between 9am and 5pm on weekdays. |  |
| Included a fully costed breakdown of the project budget. |  |
| Provided a copy of your Constitution / Governing documents signed and dated by an office bearer (must detail numbers on management committee & financial procedures for cheque /cash withdrawal). |  |
| Provided a copy of your most recent Accounts or a signed Financial Statement (statement to be signed by a person in authority within your organisation). |  |
| Provided a copy of Recent Bank / Building Society Statement (within 3 months). |  |
| Provided a copy of your current Insurance certificate or confirmed that you will obtain appropriate insurance if awarded funding. |  |
| Provided Quotations (two written quotes for each item, printed internet searches acceptable) as detailed at Annex A. NB we cannot accept links to websites etc. |  |
| Provided a copy of your lease/ proof of ownership (projects involving work to your premises / land). |  |
| Provided additional pages, where appropriate. |  |
| **Finally, are you sure this project can be completed, paid for and grant claimed by 30 March 2018?** | |
| **Please ask for assistance or clarification on any of the above from County Down Rural Community Network.** | |

### DECLARATION

**Note:** If returning your completed Application Form by post or by hand, signatures are required from two persons in authority within your organisation including the Chairperson and another office bearer e.g. Secretary or Treasurer. If you are returning the Application Form electronically, then type in the appropriate names below. If your application is successful, appropriate signatures will be collected through the Letter of Offer process.

|  |  |
| --- | --- |
| **Signed:** | **Chairperson** |
| **Name:**  **(block caps)** | **Date:** |

|  |  |
| --- | --- |
| **Signed:** | **Position held:** |
| **Name:**  **(block caps)** | **Date:** |

**The Rural Micro Capital Grant Scheme is funded by the**

**Department of Agriculture, Environment and Rural Affairs as part of its**

**Tackling Rural Poverty and Social Isolation Programme.**

For the Newry, Mourne and Down District Council area, County Down Rural Community Network is delivering this Scheme on behalf of the Department of Agriculture, Environment and Rural Affairs.

|  |  |
| --- | --- |
| Please email your completed application and scanned, electronic attachments to:  [nuala@countydownrcn.com](mailto:nuala@countydownrcn.com) and copy to info@countydownrcn.com | Alternatively, print and post the completed application form and attachments (e.g. constitution, insurance certificate /schedule, quotes, etc) in a sealed envelope to:  *County Down Rural Community Network, 40 Killough Road, Downpatrick, BT31 9US Tel: 028 4461 2311* |
| Applications must be received by 4PM on Friday 29 September 2017Late or incomplete applications will NOT be accepted.Proof of postage is NOT proof of receipt. | |

|  |
| --- |
| Data Protection and Freedom of Information Issues DAERA and our delivery agents take data protection and freedom of information issues seriously. We take care to ensure that any personal information supplied is dealt with in a way which complies with the requirements of the Data Protection Act 1998. This means that any personal information you supply will be processed principally for the purpose for which it has been provided. However, DAERA may also use it for other legitimate purposes in line with the Data Protection Act 1998 and Freedom of Information legislation. These include:   * + - Occupational health and welfare;     - Compilation of statistics;     - Disclosure to other organisations when required to do so; and     - Disclosure under the Freedom of Information Act 2000 or the Environmental Information Regulations 2004 where such disclosure is in the public interest. |

|  |
| --- |
| WARNING To knowingly or recklessly make a false statement to obtain aid for yourself or anyone else, will lead to disqualification, liability to refund of any aid already paid and possible prosecution.  The information provided on this form may be made available to other Departments/Agencies for the purposes of preventing and detecting crime.  **DAERA FRAUD HOTLINE 0808 1002716** |

**Evidence of Value Annex A**

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Item** | **Estimated costs – quotes received** | | | | **Preferred Supplier** | **Cost** |
| Supplier 1 | Quote | Supplier 2 | Quote |
| Example:  Printer, Model XYZ Windows 10 | ABC Printers Ltd | £205.12 | Printers R Us | £210 | ABC Printers Ltd | £205.12 |
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Please use this form to provide detail of the quotes that you have obtained in respect of the individual items you wish to purchase. An example has been provided in the first line. Continue on a separate sheet if necessary.

NB:

* At least 2 quotes from 2 separate suppliers should be sought for each item.
* Quotes should be ‘like-for-like’; particularly where items are specific e.g. laptop / IT / machinery etc. Quotations for the same make and model of products must be provided.
* Written quotes should be dated and addressed to your organisation.
* Internet searches should be printed off and sent with your application – we will not accept website addresses / links to websites.
* The lowest quotation should be selected with corresponding costs detailed on the application form.
* Please note that DAERA will reimburse at the cost of the lowest quotation