



LOSTOCK GRALAM
PARISH COUNCIL

Lostock Gralam Parish Council Grant Application Form

Name of Organisation			
Is your organisation within Lostock Gralam	Yes / No	Registered Charity No (if applicable)	
Contact Name			
Contact Address			
	Post Code		
Email Address			

GRANT APPLICATION FORM ABOUT YOUR GRANT REQUEST

Grant amount being requested	£	Date	
Payee (as shown on organisation bank statement)			
Bank details	Sort Code	Account Number	
Purpose of grant <i>Please set out what your project aims and objectives are.</i>			

Have you approached other bodies for funding	Yes / No	Will this grant cover all costs?	Yes / No
How much will your project/activity cost in total?	£	How much will your organisation contribute to the project/activity?	£
Does your grant meet one or more of our objectives? A. Providing a service B. Enhancing the quality of life C. Improving the environment D. Promoting Lostock Gralam Parish in a positive way	A, B, C or D:	How many people will benefit from this grant? A -Less than 20 B- Between 20-100 C- Between 100-500 D -More than 500	A, B, C or D:

Please use this space to tell us anything else about your project/activity which you feel would be relevant to our decision making.

Parish Council use only			
Application Reference No.		Grant approved	Yes / No
Grant amount awarded	£	Meeting date approved	
Payment date		Payment reference	

Please return form to: Clerk@lostockgralamparishcouncil.co.uk