**APPLICANT'S DETAILS**

|  |  |  |
| --- | --- | --- |
| 1. | Primary organisation that is making the application  |  |
| 2. | Organisation's Address  |  |
| 3. | What is the nature of your organisation?  |  |
| 4. | Company / Charity Number |  |
| 5  | Lead Contact Name |  |
| 6. | Deputy Lead Contact Name  |  |
| 7. | Contact Telephone Number |  |
| 8. | E-mail address |  |
| 9. | Organisation's website address |  |
| 10. | Does your organisation have a bank account in its name which requires two signatories to authorise Payments?  |  |
| 11. | Does your group claim VAT? |  |
| 12. | What is the main activity and objectives of your organisation? |  |
| 13. | If you work with children or vulnerable adults, note which steps are undertaken to safeguard them.  |  |

**In accordance with SPF programme guidelines, here are the main Interventions, Outputs and Outcomes that are relevant to the Enabling Our Culture Fund.**

|  |
| --- |
| **ENABLING OUR CULTURE AND WELL-BEING FUND**  |
| **Interventions**  | **Indicative Outputs**  | **Indicative Outcomes**  |
| W6: Support for local arts, cultural, heritage and creative activities. | * Number of potential entrepreneurs assisted to be business ready
* Number of organisations receiving financial support other than grants
* Number of organisations receiving grants
* Number of organisations receiving non-financial support Number of local events or activities supported
* Number of volunteering opportunities supported
 | * Jobs created
* Jobs safeguarded
* Increased footfall
* Increased visitor numbers
* Improved engagement numbers
* Improved perception of facilities/amenities
* Number of community-led arts, cultural, heritage and creative programmes as a result of support
* Improved perception of events
 |
| W8: Funding for the development and promotion of wider campaigns and year-round experiences which encourage people to visit and explore the local area. | * Number of organisations receiving financial support other than grants
* Number of organisations receiving grants
* Number of people reached

 * Number of organisations receiving non-financial support
 | * Increased footfall Increased visitor numbers
* Increased number of web searches for a place
* Reduced vacancy rates
 |
| W17: Funding for the development and promotion (both trade and consumer) of the visitor economy, such as local attractions, trails, tours and tourism products more generally. | * Number of businesses receiving grants
* Number of businesses receiving financial support other than grants
* Number of businesses receiving non-financial support
* Number of tourism, culture or heritage assets created or improved
* Number of people reached
* Number of local events or activities supported
 | * Jobs created
* Jobs safeguarded
* Increased footfall
* Increased visitor numbers
* Increase in visitor spending
* More investment
* Improved perception of attractions
 |

**INFORMATION ABOUT THE PROJECT / EVENT YOU WANT TO BE FUNDED VIA THE FUND**

|  |  |  |
| --- | --- | --- |
| 14. | Project / Event Name  |  |
| 15. | Project/event location  |  |
| 16. | Main Investment Priority  |  |
| 17. | Type of application made  |  |
| 18. | SPF Fund Intervention Numbers  |  |
| 19. | SPF Indicative Outputs Targets |  |
| 20. | SPF Indicative Outcomes Targets |  |
| 21. | Start Date of the Project / Event  |  |
| 22. | End Date of the Project / Event  |  |

**PROJECT’S MILESTONES**

|  |  |  |
| --- | --- | --- |
| 23. | List the milestones of your project/event |  |

**DESCRIPTION OF THE PROJECT/EVENT**

|  |  |  |
| --- | --- | --- |
| 24. | Overview of your project / event (up to 500 words) |  |
| 25. | Why is there a need for the project/event in your area? (up to 250 words) |  |
| 26. | Who would benefit from the project/event? (up to 150 words) |  |

**REAL LIVING WAGE**

|  |  |  |
| --- | --- | --- |
| 27. | I / we confirm that any jobs created as a result of the grant will pay the Real Living Wage, and I /we will work towards a Living Wage accreditation  | Additionally, there will be a need to note when you will work to complete a living wage accreditation  |

**LOCAL PLANS AND STRATEGIES**

|  |  |  |
| --- | --- | --- |
| 28.a | Note how using the grant will complement the objectives of the Gwynedd Plan 2023-2028. |  |
| 28.b | Note how using the grant will complement the Gwynedd Regeneration Framework and the Area Action Plans.  |  |
| 28.c | Note how using the grant will complement the objectives of the Gwynedd Arts Plan  |  |
| 28.ch | Note how using the grant will complement the good practice of the Gwynedd Events Guide |  |
| 28.d | Note how using the grant will complement the objectives of the Slate Landscape of Northwest Wales World Heritage Site Management Plan |  |
| 28.dd | Note how using the grant will intertwine complement Gwynedd and Eryri Sustainable Visitor Economy Plan 2035 |  |

**THE WELSH LANGUAGE**

|  |  |  |
| --- | --- | --- |
| 29. | Does your organisation have a Welsh Language Policy or Statement? |  |

**NET ZERO**

|  |  |  |
| --- | --- | --- |
| 30. | How does the proposal support the wider environmental Zero Net policies or ambitions of the UK Government and Welsh Government? (150 words) |  |

**EQUALITY**

|  |  |  |
| --- | --- | --- |
| 31. | Describe how you have considered the equality impacts of your proposal, the relevant affected groups based on the protected characteristics, and any measures you are proposing in response to these impacts. (150 words) |  |

**APPLICANT EXPERIENCE AND CAPACITY**

|  |  |  |
| --- | --- | --- |
| 3 | What experience has your organisation got in delivering the type, size and scale of this project / event activity (up to 200 words)? |  |

**FINANCIAL**

|  |  |  |
| --- | --- | --- |
| 35. | Total cost of the project |  |
| 36. | Grant total applied for via this fund |  |
| 37. | Revenue or Capital  |  |
| 38. | Match Funding Source and Amount  |  |
| 39. | If you are seeking 100% of the cost of your project/event, note your rationale for this  |  |
| 40.  | How have you procured your project/event?  |  |

|  |  |
| --- | --- |
| **PROFFIL GWARIANT Y PROSIECT /DIGWYDDIADAU** **PROJECT EXPENDITURE PROFILE/EVENTS**  | **Nodwch enw’r cyd arianwyr isod** **Please note match funders below**  |
| Enw’r eitem a’r gost  *Item and cost*  | **Enabling Our Culture Fund** |   ***Organisation/events contribution....***  ***………………………***  |   *Grant joint-funding details....*  *………………..*  | *……………….*  *………………..*  |   *……………….*  *………………..*  | **Cyfanswm** ***Total***  |
| **1.**  | **£**  |  |   |  |   |   |  |
| **2.**  | **£**  |   |   |   |   |   |   |
| **3.**  | **£**  |   |   |   |   |   |   |
| **4.**  | **£**  |   |   |   |   |   |   |
| **5.**  | **£**   |   |   |   |   |   |   |
| **6.**  | **£**  |   |   |   |   |   |   |
| **Cyfanswm** ***Total***  | **£**  |   |   |   |   |   |   |

**MANAGING GRANTS**

**MANAGEMENT OF STATUTORY AUTHORITIES GRANTS**

**This grant is provided under the Minimum Financial Assistance (MFA) of the Subsidy Control Act (2022). The funding does not exceed £315,000 over a three-year fiscal period as 'Minimum Financial Assistance' (MFA), in accordance with the Subsidy Control Act (2022).**

**Therefore, in order to confirm that you are eligible to access this support, as set out in section 36(1) of the Subsidy Control Act (2022) you must declare the full amount of EU State Aid de Minimus/SAFA/SPEI/MFA support you have received in the last 36 months from the date on your offer letter for this grant.**

**Every business / organisation that seeks support must acknowledge the rules and ensure that the support provided under this scheme is no higher than the maximum support that can be given to an organisation under these regulations.**

**I declare that these are the sums of EU State Aid de Minimus/SAFA/SPEI/MFA support received by the organisation in the last three years (any grant offer letter will indicate what support has been given)**

|  |  |  |  |
| --- | --- | --- | --- |
| **Year:** | **Year:** | **Year:** | **TOTAL**  |
| **Sum:** | **Sum:** | **Sum:** |  |
| **Funding Body / Bodies:** | **Funding Body / Bodies:** | **Funding Body / Bodies:** |  |
| **Offer Letter Date:**  | **Offer Letter Date:** | **Offer Letter Date:** |  |

**DECLARATION - TO BE COMPLETED BY THE APPLICANT**

**I declare that the information I have provided is correct. I understand that I must repay any financial support provided, or that no future payments will be made, if it is found that this information is incorrect.**

**Name of Organisation \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Name (PRINT) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Post \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**SUMMARY**

|  |
| --- |
| **WHAT NEEDS TO BE SUBMITTED WITH THE APPLICATION?**All applicants must return the following items: * Application Form
* Signed and dated copy of the Organisation's Constitution
* Evidence of estimates / quotations for costs of the scheme
* Bank statement heading including account details, sort code, Bank address
* Evidence of any other contributions towards the scheme (evidence of the scheme's match funding)
* Business Plan of the organisation (If relevant)
* Event Management Plan (If relevant)
* Welsh Language Policy
* Equality Policy
* Letters of Support and evidence of need
* Evidence of any legal interest in property (lease or deeds), if applicable
* Evidence of planning permission or written evidence from the relevant authority confirming that planning permission is not required (if relevant)
* Evidence of Building Regulations Approval or written evidence from the relevant authority confirming that Building Regulations Approval is not required (if relevant)
 |

