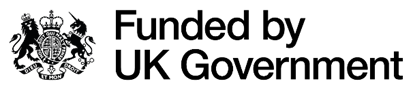
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**Nottingham City Council UKSPF**

**Cultural, Heritage and Creative Capital Grant**

**(CHC Capital Grant)**

Application Form

Applications will be assessed subject to completion of full application form and supporting documentation.

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| **For office use** | |
| Reference No. |  |
| Date application received |  |
| Date of appraisal |  |
| Name of appraiser |  |

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| **Section 1 – About your organisation** | |
| Organisation name |  |
| Type of organisation | Community Interest Company  Charitable Incorporated Organisation  Company Limited by Guarantee  Social Enterprise  Registered charity  Public body which delivers or hosts Cultural, Heritage or Creative events / programmes  Constituted body  Other – please specify:   |  | | --- | |  | |
| Contact name |  |
| Position within organisation |  |
| Organisation address |  |
| Postcode |  |
| Telephone number |  |
| Email |  |
| Website (if applicable) |  |

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| **Section 2a – Your Organisation and the proposed Cultural, Heritage or Creative event / programme** | | |
| **Describe what work your organisation currently does within the Cultural, Heritage and Creative sector**  (Max 300 words)  *Include:*  *When and why your organisation was founded / needed*  *Demographic / client group / community your organisation supports*  *Previous events / programmes delivered (include details of dates, venues, numbers attending)*  *Future planned programme of events* |  | |
| **Please select which category your planned use of the grant falls under (select all that apply)** | Arts and/or Creative Initiatives  Heritage and/or Cultural related Initiatives | |
| **Does your planned event / programme require permissions from the landlord or building owner?**  *If yes, please provide the written permissions from the landlord (even if is Nottingham City Council)* | Yes / No | |
| **Please give a description of the event / programme that the capital grant will support**  (Max 300 words)  *Please include the following:*   * *Summary / aim of the event / programme* * *Why the event / programme is beneficial to Nottingham’s residents and communities* * How your event / programme tackles a local challenge or need. * *Planned dates / duration of the event / programme* * *Target audience for the event / programme* * *No. of people you anticipate will attend / participate in the event / programme before 31st March 2025.* |  | |
| **Section 2b – The use of the Cultural, Heritage and Creative Capital Grant** | | |
| ***What equipment do you propose to purchase with the Capital grant?***  *Details of costs should be included in Section 4.* |  | |
| ***When do you plan to first use the equipment purchased using this grant?*** |  | |
| **How often will the equipment be used if your application is successful?** |  | |
| ***What do you expect the useful lifespan of this equipment to be?***  *i.e. how long could this equipment be used to support similar events / programmes to the one described in this application* |  | |
| **What will be the impact be on the planned event / programme if you are not successful with this grant application?** |  | |
| **Do you plan to deliver similar events / programmes beyond March 2025?**  If yes, how will the costs associated with the ongoingdelivery of your events / programme be funded? |  | |
| **Please provide details of the Nottingham City venue where this equipment would be stored?**  Please include details of the security measures in place to keep the equipment safe. |  | |
| **Section 3 - Achieving UKSPF Outputs and Outcomes** | | |
| **How many individual events/ activities will there be in your programme?**  Please state the frequency of events / activities  Please include the dates and venue of where these events / activities will be held |  | |
| **Will any jobs be created within your organisation as a result of the CHC capital grant?**  If yes, please give the title of the newly created roles and the no. of hours per week they will be employed. | Yes / No | |
| **Estimated impact on participation / engagement.**  Please give your engagement numbers from previous events / programmes and the numbers you estimate will attend future events / programmes if your application were successful | No. of people attending previous versions of the event / programme | Estimated no. of people attending the event / programme following successful CHC grant application. |
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| **How do you capture and record the no. of people attending your events / programmes?** |  | |

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| **Section 4 - Details of equipment to be purchased using the Grant** | | | | | | | |
| For each item of equipment please provide:   * Minimum of one written quotation must be obtained for each item to be purchased, and details must be provided below. * Copies of the supplier quotations, on supplier letterheads or screenshots, must be attached to your application. * Please go to Appendix 1 and provide more details for each line. | | | | | | | |
| **Line no.** | **Item of Equipment to be purchased** | **No. of items** | **Supplier** | **Planned date of purchase** | **Total cost (exc. VAT)** | **Total cost (inc. VAT)** | |
| 1 |  |  |  |  | £ | £ | |
| 2 |  |  |  |  | £ | £ | |
| 3 |  |  |  |  | £ | £ | |
| 4 |  |  |  |  | £ | £ | |
| 5 |  |  |  |  | £ | £ | |
| 6 |  |  |  |  | £ | £ | |
| 7 |  |  |  |  | £ | £ | |
| 8 |  |  |  |  | £ | £ | |
| 9 |  |  |  |  | £ | £ | |
| 10 |  |  |  |  | £ | £ | |
| 11 |  |  |  |  | £ | £ | |
| 12 |  |  |  |  | £ | £ | |
| 13 |  |  |  |  | £ | £ | |
| 14 |  |  |  |  | £ | £ | |
| 15 |  |  |  |  | £ | £ | |
| **Total cost of equipment to be purchased** | | | | | £ | £ | |
|  | | | | | | | |
| **Total grant requested\*** | | | | | | £ | |
| *\*Total grant requested should include the VAT amount if you are NOT able to reclaim the VAT, however for organisations who are able to reclaim the VAT the grant amount should be excluded.* | | | | | | |

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| **Section 5 - Subsidy control** | |
| The new UK subsidy control regime commenced from 4 January 2023. The new regime enables public authorities, including devolved administrations and local authorities, to deliver subsidies that are tailored for local needs. Public authorities giving subsidies must comply with the UK’s international subsidy control commitments. The subsidy control legislation provides the framework for a new, UK-wide subsidy control regime. Further information about subsidy control can be found on the gov.uk website at: <https://www.gov.uk/government/collections/subsidy-control-regime> | |
| Have you received a Subsidy or State Aid of more than £315,000 over the last 3 financial years | Yes  No |

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| **Section 6 – Payment of grant** |
| If your organisation is requesting grant payment in advance of purchase, you will need to provide evidence of your current finances.  Nottingham City Council will accept the following evidence of your organisation’s finances:  - Bank statement (Screen shot will be accepted)  - Copy of management accounts  Please ensure your evidence is clear and shows your organisation’s current financial situation |

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| Would you require to be paid the grant in advance in order to be able to purchase the equipment? \* | Yes | No |
| **If yes, please answer the remaining questions in this section**  **If no, please go to Section 7** | | |
| Please provide a detailed reason as to why you are not able to make the purchases before you receive the grant. |  | |
| Are you registered as a supplier on NCC financial system? | Yes  No | |
| Have you received any grants / payments from NCC in the past 3 years?  If yes, please give details of who oversaw the grant / payments and what the grants were for. | Yes  No | |
|  |  | |
| Are you currently receiving a grant or funding from NCC to deliver a project? (e.g. UKSPF, Multiply, Community & Family learning, etc.) | Yes  No  If yes, please give details: | |
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| **Section 7 - Declarations** | |
| * I confirm that I am authorised to sign on behalf of the Organisation and confirm that the information contained in this application form is correct to the best of my knowledge * I declare that neither myself as signatory to the application, members of the governing body of the company or agents acting on our behalf have an interest in the awarding of contacts to the suppliers who have quoted for the work. * I understand that any financial assistance granted will be repayable on demand, or future payments not made, if any information provided is found to be incorrect. I give permission for the information contained in this form to be shared, if requested, by the Programme funding body, the Department for Levelling Up, Housing & Communities, and Nottingham City Council. * I accept that the grant is consistent with most recent UK government law regarding subsidy control and any over payment of grant will be paid back to Nottingham City Council. * I understand that if Nottingham City Council approves the application, the terms and conditions shall be enforceable on the basis of the Terms and Conditions of the grant scheme * I understand that providing wrong or misleading information is a criminal offence and any such information may be used against applicants in any subsequent criminal investigation. The information provided on the online application form may be made available to other departments/agencies for the purposes of preventing or detecting crime. * I understand that any grant received by a business must be declared to HM Revenue & Customs (HMRC) as appropriate as part of the tax return for the business. * I confirm that the information provided in this application is a true and accurate description of the intended use of the grant. | |
| **Data protection** | |
| The Cultural, Heritage and Creative Capital Grant event / programme is funded through the UK Shared Prosperity Fund (UKSPF) administered by the Nottingham City Council.  The Cultural, Heritage and Creative Capital Grant has contractual obligations to record outputs and outcomes associated with this funding. Further details on the collection of this information will be included in the Grant Agreement should this application be successful.  For the purposes of the General Data Protection Regulation (GDPR), in terms of the information processed, the following parties are Data Controllers:   * The Lead Authority, Nottingham City Council   See the Privacy Notice on the Nottingham City Council UKSPF webpage for more information (www.nottinghamcity.gov.uk/ukspf). | |
| **Name** |  |
| **Signature** |  |
| **Position in business** |  |
| **Date** |  |

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| **Section 8 – Application checklist.**  **Please use this checklist to ensure that you send us everything that we need to assess your application.** | |
| You have answered all the relevant questions on this application form | Yes  No |
| You have read and signed Section 7: Declarations | Yes  No |
| You have enclosed quote(s) for proposed purchases | Yes  No |
| You have completed the Appendix 1 | Yes  No |
| If you are requesting grant payment in advance of purchase of equipment, you have attached evidence of the Organisation’s finances | Yes  No |

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| **Next steps** |
| Please email the completed form and supporting documents (quotes, budgets, bank statements and evidence of any planning permissions/consents) to:  **ukspf@nottinghamcity.gov.uk**  On receipt of a fully completed application, your application will be acknowledged as received and a decision made within 2 weeks of the meeting of the Panel. The volume of applications may affect this timescale.  Completing this application form does not guarantee the awarding of a grant. An offer letter will be sent to you if your application is approved. |

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| **Appendix 1 – Supplier details** |
| Please complete one table for every item or service listed at Section 4. Add additional boxes if required |

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| --- | --- |
| **Line no. 1** |  |
| **Items to be purchased** |  |
| **No. of Items** |  |
| **Name of supplier** |  |
| **Date of supplier quote** |  |
| **Supplier quote (£) exc VAT:** | **£** |
| **Total cost (£) inc VAT** | **£** |
| **Supplier Address (if applicable)** | |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **Town:** |  |
| **County:** |  |
| **Post Code:** |  |
| **Supplier website (if applicable)** |  |
| **Reasons for choosing this supplier:**  You must demonstrate that your chosen supplier offers value for money and that you procured them fairly.  Please include: price, supplier expertise, track record and quality in your response. |  |

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| **Line no. 2** |  |
| **Items to be purchased** |  |
| **No. of Items** |  |
| **Name of supplier** |  |
| **Date of supplier quote** |  |
| **Supplier quote (£) exc VAT:** | **£** |
| **Total cost (£) inc VAT** | **£** |
| **Supplier Address (if applicable)** | |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **Town:** |  |
| **County:** |  |
| **Post Code:** |  |
| **Supplier website (if applicable)** |  |
| **Reasons for choosing this supplier:**  You must demonstrate that your chosen supplier offers value for money and that you procured them fairly.  Please include: price, supplier expertise, track record and quality in your response. |  |

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| **Line no. 3** |  |
| **Items to be purchased** |  |
| **No. of Items** |  |
| **Name of supplier** |  |
| **Date of supplier quote** |  |
| **Supplier quote (£) exc VAT:** | **£** |
| **Total cost (£) inc VAT** | **£** |
| **Supplier Address (if applicable)** | |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **Town:** |  |
| **County:** |  |
| **Post Code:** |  |
| **Supplier website (if applicable)** |  |
| **Reasons for choosing this supplier:**  You must demonstrate that your chosen supplier offers value for money and that you procured them fairly.  Please include: price, supplier expertise, track record and quality in your response. |  |

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| **Line no. 4** |  |
| **Items to be purchased** |  |
| **No. of Items** |  |
| **Name of supplier** |  |
| **Date of supplier quote** |  |
| **Supplier quote (£) exc VAT:** | **£** |
| **Total cost (£) inc VAT** | **£** |
| **Supplier Address (if applicable)** | |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **Town:** |  |
| **County:** |  |
| **Post Code:** |  |
| **Supplier website (if applicable)** |  |
| **Reasons for choosing this supplier:**  You must demonstrate that your chosen supplier offers value for money and that you procured them fairly.  Please include: price, supplier expertise, track record and quality in your response. |  |

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| **Line no. 5** |  |
| **Items to be purchased** |  |
| **No. of Items** |  |
| **Name of supplier** |  |
| **Date of supplier quote** |  |
| **Supplier quote (£) exc VAT:** | **£** |
| **Total cost (£) inc VAT** | **£** |
| **Supplier Address (if applicable)** | |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **Town:** |  |
| **County:** |  |
| **Post Code:** |  |
| **Supplier website (if applicable)** |  |
| **Reasons for choosing this supplier:**  You must demonstrate that your chosen supplier offers value for money and that you procured them fairly.  Please include: price, supplier expertise, track record and quality in your response. |  |

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| **Line no. 6** |  |
| **Items to be purchased** |  |
| **No. of Items** |  |
| **Name of supplier** |  |
| **Date of supplier quote** |  |
| **Supplier quote (£) exc VAT:** | **£** |
| **Total cost (£) inc VAT** | **£** |
| **Supplier Address (if applicable)** | |
| **Address Line 1:** |  |
| **Address Line 2:** |  |
| **Town:** |  |
| **County:** |  |
| **Post Code:** |  |
| **Supplier website (if applicable)** |  |
| **Reasons for choosing this supplier:**  You must demonstrate that your chosen supplier offers value for money and that you procured them fairly.  Please include: price, supplier expertise, track record and quality in your response. |  |