

# District Executive Delegated Budget Funding Proposal Form 2014/2015

Note: The same form is used for all applications for funding from District Partnership whether from the District Partnership budget or the budgets of individual Councillors

TO WHICH DISTRICT PARTNERSHIP ARE YOU APPLYING: (Tick for each area if you are applying to)

- CHADDERTON
- EAST OLDHAM
- FAILSWORTH & HOLLINWOOD
- SADDLEWORTH & LEES
- SHAW, CROMPTON & ROYTON
- WEST OLDHAM

## 1. WHAT IS THE FUNDING SOUGHT FOR?

TITLE OF PROJECT:  
SADDLEWORTH FESTIVAL OF THE ARTS

WHICH ORGANISATION WILL DELIVER THE PROJECT/LEAD DELIVERY OF PROJECT?  
FESTIVAL COMMITTEE

PLEASE DESCRIBE THE PROJECT THAT YOU ARE SEEKING FUNDING FOR  
THE FESTIVAL IS HELD EVERY FOUR YEARS AND THE NEXT ONE IS PLANNED FOR 2015. IT OFFERS A MIXTURE OF PROFESSIONAL ARTISTS, LOCAL SOCIETIES AND TASTER EVENTS FOR YOUNG PEOPLE, A BELL RACE, AND WORKSHOPS FOR YOUNG PEOPLE IN MUSIC & POETRY

WHICH OTHER GROUPS/ORGANISATIONS (IF ANY) ARE YOU WORKING WITH ON THIS PROJECT AND HOW? LOCAL SOCIETIES, DISCUSSIONS WITH LOCAL ARTISTIC GROUPS AND TO PROVIDE SPORTING TASTER EVENTS FOR YOUNG PEOPLE.

WHEN DO YOU EXPECT TO:

- START THE PROJECT? 6 JUNE 2015
- COMPLETE THE PROJECT? 14 JUNE 2015. WE WILL BE REQUIRED TO MAKE PAYMENTS ON ACCOUNT FOR SOME OF THESE EVENTS BETWEEN JANUARY - MARCH 2015

HOW MANY PEOPLE WILL USE / BENEFIT FROM THE PROJECT?

Estimated number of people BETWEEN 5000 - 6000

Period of time over which they will benefit: DURATION OF FESTIVAL

(e.g. is the number of people above over the lifetime of the project, per day, per week etc)

**WHAT NEEDS / PROBLEMS OF RESIDENTS OF THE DISTRICT PARTNERSHIP WILL BE MET BY THE PROJECT?** THE OPPORTUNITY TO SEE NATIONAL FIGURES IN ARTS & CULTURE IN THE LOCAL AREA AT REALISTIC PRICES AND TO SPARK AN INTEREST IN JOINING LOCAL SOCIETIES IN FUTURE. TO OFFER EXPERIENCE OF DIFFERENT SPORTS TO YOUNG PEOPLE

**HOW WILL THE PROJECT PARTICULARLY BENEFIT DISADVANTAGED RESIDENTS OF THE DISTRICT PARTNERSHIP AREA?** TO OFFER ACCESS TO EVENTS LOCALLY AND WIDEN SUPPORT FOR LOCAL ORGANISATIONS. A NUMBER OF FREE TICKETS WILL BE GIVEN TO SCHOOLS TO ATTEND WORKSHOPS. AT THE LAST FESTIVAL THE TASTOR EVENTS WERE WELL ATTENDED BY A WIDE SELECTION OF LOCAL FAMILIES.

**HOW WILL THE BENEFITS OF THE PROJECT LAST BEYOND THE DURATION OF THE FUNDED ACTIVITY?** IT IS EXPECTED THAT A NUMBER OF LOCAL SPORTING AND OTHER ORGANISATIONS WILL BENEFIT FROM A GREATER TAKE UP OF THEIR FACILITIES.

**WHAT RISKS ARE THERE WITH THE PROJECT?**

e.g. public safety, involving sufficient residents, ability to deliver the project on time  
STEPS WILL BE TAKEN TO MANAGE PUBLIC SAFETY AT ALL VENUES

**HOW WILL THESE RISKS BE MANAGED?** IN COLLABORATION WITH THE OWNERS OF THE VENUES EC. SADDLEBETH PARISH COUNCIL

**HOW WILL THE PROJECT/ACTIVITY BE PUBLICISED?** PRESS, ADVERTS, LEAFLETS TO LOCAL SCHOOLS, A DEDICATED WEB SITE WITH ONLINE BOOKING

## 2. DETAILS ABOUT THE FINANCE OF THIS PROJECT

**PLEASE PROVIDE A DETAILED BREAKDOWN OF THE TOTAL COSTS OF THE PROJECT/ACTIVITY FOR WHICH YOU ARE SEEKING FUNDING**

If relevant, please include the full cost of the project not just costs for which funding is sought from the District Partnership

Please include the cost of VAT, if applicable, in the space provided. If VAT is not payable, please indicate the cost of VAT is zero.

ITEM	COST
ESTIMATED COSTS OF ARTISTS	£ 47,500
HIRE OF PIANNO, STAGE LIGHTING	£ 4500
PUBLICITY	£ 3500
SUPPERS (SELF FINANCING)	£ 8000
INSURANCE, WEB SITE, CREDIT CARD FEES	£ 3500
TROPHIES, FLOWERS	£ 1000
MISCELLANEOUS	£ 2000
	£
	£
VAT (if applicable)	£
<b>TOTAL PROJECT COST</b>	<b>£ 70,000</b>

**PLEASE PROVIDE A DETAILED BREAKDOWN OF THE EXPECTED FUNDING OF THESE COSTS**

Please include funding sought from the District Partnership and all other sources

SOURCE OF FUNDING	AMOUNT £	STATUS (e.g. committed / applied for)	DATE DECISION EXPECTED (if funding not committed)
TICKET SALES - SUPPER	45000		TO BE SOLD
BARBEN OPENING, OTHER	5000		
SPONSORSHIP -			
PARISH COUNCIL COMMITTED	4000	AGREED	
DICTIONARY TO BE RAISED	6000	COMMITTED	
DISTRICT PARTNERSHIP	3500		VARIOUS LOCAL COMPANIES APPROACHED, VERIDOR, ARTS COUNCIL
<b>TOTAL FUNDING</b>	<b>£ 70,000</b>		

**HAVE YOU ALREADY RECEIVED FINANCIAL ASSISTANCE FROM THE COUNCIL OR ANY OTHER SOURCE FOR THIS PROJECT IN THE LAST 2 YEARS?**

YES  NO

IF YES PLEASE GIVE DETAILS BELOW:

SOURCE OF FUNDING	AMOUNT RECEIVED £	DATE

**WILL THE PROJECT GENERATE ANY INCOME FOR ANY ORGANISATION?**

YES  NO

If Yes, how much per year?

**COST ESTIMATES**

If the project involves building works, purchase of equipment or any other works involving a third party, you will need to supply at least two full estimates for the work

Estimates attached:  YES  NO

NOT APPLICABLE

**HOW WILL ANY LONG TERM COMMITMENTS THAT WILL BE INCURRED AS A RESULT OF THIS PROJECT BE MET?**

e.g. insurance, maintenance, running costs

NOT APPLICABLE

**3. DETAILS ABOUT LAND AND BUILDINGS**

**ARE YOU APPLYING FOR FUNDING FOR WORKS TO LAND AND/OR BUILDINGS?**  
 YES       NO

If Yes, please complete all the boxes in this section. If NO, go to Section 4

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**WHO OWNS THE LAND AND/OR BUILDINGS WHERE THE PROJECT WILL BE SITED?**

You/your organisation     

Oldham Council            ~~YES~~

Other (please specify below)     

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**DO YOU HAVE THE NECESSARY PERMISSIONS IN WRITING FROM THE LAND OWNER TO DELIVER THE PROJECT?**

YES       NO

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**IS PLANNING PERMISSION NEEDED?**

YES       NO

IF YES, PLEASE INDICATE THE STATUS OF ANY PLANNING APPLICATION

NOT YET APPLIED

APPLIED & AWAITING DECISION

PERMISSION GRANTED

**4. DETAILS OF THE ORGANISATION WHICH WILL DELIVER THE ACTIVITY**

<b>ORGANISATION:</b>	SADDLEWORTH FESTIVAL OF THE ARTS
<b>NAME OF CONTACT PERSON:</b>	COLIN SMITH
<b>POSITION IN ORGANISATION:</b>	COMMITTEE MEMBER
<b>ADDRESS FOR CORRESPONDENCE</b>	12 NUDGEOR GREEN DOBCRESS OLDHAM OL3 5AN
<b>CONTACT TEL NO:</b>	01457 873055
<b>E-MAIL ADDRESS:</b>	colin.smith937@sky.com
<b>FAX NO:</b>	

THE DETAILS IN THE TABLE BELOW ARE NOT REQUIRED FOR STATUTORY ORGANISATIONS (SUCH AS THE COUNCIL OR POLICE)

**DOES YOUR ORGANISATION HAVE A WRITTEN CONSTITUTION?**

YES  NO

If Yes, please enclose a copy

**PLEASE BRIEFLY OUTLINE THE AIMS AND ACTIVITIES OF YOUR ORGANISATION**

A COMPANY LIMITED BY GUARANTEE, REGISTERED WITH THE CHARITY COMMISSION - COMPANY NO 6203418, REGISTERED CHARITY NO 1121021

**WHEN WAS YOUR ORGANISATION FORMED?**

2009

**WHAT ARE THE MANAGEMENT ARRANGEMENTS FOR THE ORGANISATION?**

(e.g. Who sits on the Management Group and how often do they meet?)

COMMITTEE MEETS PERIODICALLY UNTIL TWO YEARS BEFORE EACH FESTIVAL AND THEN SIX WEEKLY AND IN THE FINAL RUN UP MONTHLY LOCAL RESIDENTS OF SADDLEWORTH

**HOW DOES YOUR ORGANISATION ENSURE EQUALITY OF ACCESS TO ITS SERVICES TO ALL MEMBERS OF THE COMMUNITY?**

THROUGH WIDE SPREAD ADVERTISING, USING CONTACT WITH LOCAL SOCIETIES, CONTACTS WITH LOCAL SCHOOLS

**5. PAYMENT ARRANGEMENTS**

**HOW WOULD YOU LIKE ANY FUNDING AGREED TO BE PAID? Please provide a copy of your recent audited accounts or recent bank statement.**

BACS PAYMENT INTO BANK ACCOUNT   
CHEQUE

**DETAILS FOR BACS PAYMENT**

We are already set up on your system, you have our details.

NAME OF BANK ACCOUNT

BANK

ACCOUNT NUMBER

SORT CODE

PAYMENT REFERENCE

**DETAILS FOR CHEQUE PAYMENT**

NAME OF BANK ACCOUNT

SADDLEWORTH FESTIVAL

ADDRESS TO SEND CHEQUE TO

12 NUDGER GREEN

DOB CROSS

OLDHAM

OL3 5AW

**IS YOUR ORGANISATION REGISTERED FOR VAT?**

YES  NO

If Yes, any sum awarded will **exclude** your VAT costs.


**6. DECLARATION**

I declare that the information given on this form is true and accurate.

I undertake to provide the Council with full receipts to confirm evidence of expenditure for any funding awarded.

I understand that the Council may take legal action for recovery of money awarded if evidence of expenditure is not provided, or if the money is not used for the purpose for which it is awarded.

I confirm that I am authorised to sign this application on behalf of the organisation

Name (please print)	COLIN SMITH		
Organisation / department	SADDLEWORTH FESTIVAL COMMITTEE		
Position in organisation	COMMITTEE MEMBER		
Signature			
Date	7 6 2014		
Enclosures included with application	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	COMPANY REGISTERED WITH CHARITY COMMISSION
Constitution	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	
Recent Bank Statements and/or Audited Accounts (required for Organisations applying for funds)	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	
Two full estimates	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	

Please check that you have included all the necessary enclosures and return this form by post or email to:

**District Co-ordinator**  
**Lisa Macdonald**  
 Saddleworth & Lees District Team  
 Oldham Council  
 Uppermill Library - upstairs office  
 St Chads, High Street  
 Uppermill  
 OL3 6AP

0161 770 5195  
[lisa.macdonald@oldham.gov.uk](mailto:lisa.macdonald@oldham.gov.uk)