

# District Executive Delegated Budget Funding Proposal Form 2013/2014

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: NEW STAGE LIGHTING

WHICH ORGANISATION WILL DELIVER THE PROJECT/LEAD DELIVERY OF PROJECT? UPPERMILL STAGE SOCIETY

PLEASE DESCRIBE THE PROJECT THAT YOU ARE SEEKING FUNDING FOR  
REFURBISHMENT AND PURCHASE OF A NEW  
STAGE LIGHTING SYSTEM AT EBENEZER CHURCH HALL

WHICH OTHER GROUPS/ORGANISATIONS (IF ANY) ARE YOU WORKING WITH ON THIS PROJECT AND HOW?

EBENEZER CHURCH - ACCESS TO BUILDING

WHEN DO YOU EXPECT TO:

- START THE PROJECT? 1ST JULY 2014
- COMPLETE THE PROJECT? 15TH JULY 2014

HOW MANY PEOPLE WILL USE / BENEFIT FROM THE PROJECT?

Estimated number of people THE THEATRE GOING COMMUNITY OF SADDLEWORTH AND OUTLYING AREAS

Period of time over which they will benefit: FORSEABLE FUTURE

(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 PROJECT WILL CONTINUE AND ENHANCE THE VARIETY OF THEATRICAL PRODUCTIONS OFFERED TO THE COMMUNITY

**HOW WILL THE PROJECT PARTICULARLY BENEFIT DISADVANTAGED RESIDENTS OF THE DISTRICT PARTNERSHIP AREA?**

OUR SOCIETY IS INCLUSIVE AND IS OF BENEFIT TO ALL RESIDENTS BOTH AS PARTICIPANTS AND AUDIENCE MEMBERS.

**HOW WILL THE BENEFITS OF THE PROJECT LAST BEYOND THE DURATION OF THE FUNDED ACTIVITY?**

THE NEW LIGHTING SYSTEM IS REQUIRED AS THE CURRENT SYSTEM HAS NOT BEEN PASSED AS SAFE AND FOLLOWING REPLACEMENT WILL NOT REQUIRE

UPDATING FOR THE FORESEEABLE FUTURE

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

e.g. public safety, involving sufficient residents, ability to deliver the project on time

NO RISKS TO PUBLIC SAFETY. THERE IS A RISK

HOW WILL THESE RISKS BE MANAGED? TO THE STAGE SOCIETY AS PRODUCTIONS CANNOT CONTINUE UNTIL THE LIGHTING IS REPLACED.

**HOW WILL THE PROJECT/ACTIVITY BE PUBLICISED?** SOCIETY LITERATURE PROGRAMMES, EMAILS, POSTERS

**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
SEE ATTACHED	£
	£
	£
	£
	£
	£
	£
	£
	£
VAT (if applicable)	£
<b>TOTAL PROJECT COST</b>	<b>£ 2515.14</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)
<b>TOTAL FUNDING</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

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

e.g. insurance, maintenance, running costs      INSURANCE COSTS FROM OUR FUNDS

RUNNING COSTS MET BY CHURCH WHO BILL UPPERMILL STAGE SOCIETY FOR HALL USE.

### 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

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

You/your organisation

Oldham Council

Other (please specify below)  EBENEZER CHURCH

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

YES  NO

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

ORGANISATION:	UPPERMILL STAGE SOCIETY
NAME OF CONTACT PERSON:	LORRAINE REYNOLDS
POSITION IN ORGANISATION:	HON. SECRETARY
ADDRESS FOR CORRESPONDENCE	275 MANCHESTER ROAD MOSSLEY ASHTON-U-LYNE OL5 9AN
CONTACT TEL NO:	01457 836341
E-MAIL ADDRESS:	lawtonlr@aol.com
FAX NO:	

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  
TO EDUCATE AND ENTERTAIN THE PUBLIC IN THE DRAMATIC AND  
OPERATIC ARTS AND TO FURTHER THE DEVELOPMENT OF  
PUBLIC APPRECIATION IN THESE ARTS.

WHEN WAS YOUR ORGANISATION FORMED? 1969

WHAT ARE THE MANAGEMENT ARRANGEMENTS FOR THE ORGANISATION?  
(e.g. Who sits on the Management Group and how often do they meet?)

MONTHLY COMMITTEE MEETINGS - NINE COMMITTEE MEMBERS

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

PRODUCTIONS ARE ADVERTISED WIDELY AND ARE OPEN  
TO ALL MEMBERS OF THE COMMUNITY

## 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	
ADDRESS TO SEND CHEQUE TO	MR. D POWELL - HON TREASURER 15 ACORN MILL MELLOR ST LEES OL4 3DH

IS YOUR ORGANISATION REGISTERED FOR VAT?

YES  NO

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

If your organisation is not VAT registered, the Council will make arrangements to pay  
suppliers/contractors directly so that no VAT is incurred.

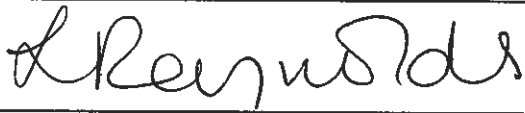
## 6. DECLARATION

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)	LORRAINE REYNOLDS
Organisation / department	UPPERMILL STAGE SOCIETY
Position in organisation	HON. SECRETARY
Signature	
Date	
Enclosures included with application	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
Constitution	<input checked="" type="checkbox"/> YES <input 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 checked="" type="checkbox"/> YES <input 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)

**FOR OFFICIAL USE ONLY:**

District Partnership Budget Funding agreed

District Partnership	Sum allocated	Date of meeting
	£	
	£	
	£	
	£	

Councillor Budget funding agreed

Name of Councillor	Sum allocated	Signature
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	
	£	

<b>Total sum allocated to project</b>	£
<b>Conditions attached to funding (if applicable)</b>	

	Date	Completed by:
<b>Reported to the District Partnership</b>		
<b>Decision posted on the District Partnership webpage</b>		
<b>Payment/ order raised</b>		
<b>Contractor instructed (Attach documentation)</b>		