

## Kent County Council Combined Member Grants Scheme Application Form 2020-2021

Unique Reference Number (for office use only):

Adults / Arts / Children / Community Centres & Public Halls / Community Safety / Education / Environment / Highways / Libraries and Archives / PROW / Public Health / Sports / Youth

Multiple Application Yes  No

Number of Members Supporting:

ONE

Organisation Name:

THE WHITSTABLE CASTLE TRUST

Title of Project:

ARBORICULTURE WORK

### Section One: Contact details (All correspondence will be via the primary contact)

#### Primary Applicant:

Contact name (Inc. title)

Position in organisation / group:

I am 18 years old or older:

Yes

No

Correspondence Address:

Postcode:

Email address:

Daytime telephone number:

#### Senior Contact in your organisation / group:

The Senior Contact and Primary Applicant (above) must be two different and unrelated people

Contact name (Inc. title)

Position in organisation / group:

I confirm I am 18 years old or older:

Email address:

Daytime telephone number:



## Kent County Council Combined Member Grant Privacy Notice

To comply with UK and EU data protection laws, Kent County Council (the Data Controller) is required to explain what personal data (information) we hold about you, why we collect it and how we use and may share information about you.

**What data we process and why:** In order to process a KCC Combined Member Grant application, we need to collect and hold personal information about you so that we may contact you during the grant administration process, make a payment to you and monitor a project once it is completed. The information we need to administer a grant is your name, a telephone number, an office or residential address and an email address as well as your organisation's bank account details.

**How we store your data:** Your personal information will be held securely and retained electronically for seven years in line with national audit requirements, after which the information will be deleted. Your information will not be transferred outside of the European Economic Area (EEA).

**Sharing your data:** KCC will share personal information with law enforcement or other authorities, as required. KCC must protect public funds and may use personal information and data-matching techniques to detect and prevent fraud. If you provide false or inaccurate information in your application, or at any point in the life of any funding we award you, and fraud is identified, we will seek recovery of the awarded grant funding, and will provide details to fraud prevention agencies to help prevent fraud and money laundering.

For further information about data protection and your rights under the EU General Data Protection Regulation please visit [kent.gov.uk/privacy](http://kent.gov.uk/privacy).

Which Kent County Council Members are supporting this grant application?

You must have discussed this application with the Kent County Council Member before submitting this form

### Section Two: About your organisation / group

In this section, we want you to tell us more about your organisation / group. (We will ask you about the project you want funding for in Section Three.)

<b>Organisation / Group Name:</b>	
1. Is your organisation / group a Registered Charity?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
If yes, please provide your charity number:	1126553
2. Do you have a bank account, which requires two unrelated people to authorise cheques and make withdrawals (including debit card or internet purchases and cash withdrawals)? This must be in the name of the organisation / group that is applying, unless it is a school.	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Before a conditional grant offer will be paid by KCC, you will need to provide evidence that your organisation is properly constituted. Can you supply one of these documents please?	<input checked="" type="checkbox"/> Memorandum & Articles of Association <input type="checkbox"/> Governing document, constitution, Companies House registration document, or set of rules?





3. What type of organisation / group are you?

Please select the options below that best describe your organisation / group:

Registered Charity	<input checked="" type="checkbox"/>	Community/Voluntary organisation	<input type="checkbox"/>	Sports organisation	<input type="checkbox"/>
Church / Faith group	<input type="checkbox"/>	Not for Profit Company	<input type="checkbox"/>	Parish / Town / District council	<input type="checkbox"/>
KCC Service	<input type="checkbox"/>	School/College/ Pre-school	<input type="checkbox"/>	Youth organisation	<input type="checkbox"/>

4. Has KCC funded any part of your work, or commissioned or procured services from you in the last three years? (Failure to declare this could result in your grant offer being withdrawn)

Yes  No

If yes, please state the nature of the commissioned services and value of the contract or funding agreement, and the named Kent County Council contact.

N/A.

5. In the past three years has your organisation / group received a previous grant from the KCC Combined Member Grants scheme?

Yes  No

If yes, please complete the information below

Project Ref/ Project Name	KCC Member Name(s)	Amount £	Date Received
DEFIBRILLATOR	MR DANCE MR.T. THOMAS	£1500	APRIL 2018

(Add more rows if necessary)

6. Has your organisation / group applied to any other funding bodies for grant support for this project? If yes, please complete the information below			Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Name of Organisation / Funder	Amount Applied for £	Amount Received £	Date Received / Anticipated	

(Add more rows if necessary)

7. If you have received any other funding for this project, please state below any terms / conditions attached to that funding that KCC should be aware of when considering this application

N/A.

8. Please explain what funding or other resources your own organisation / group is contributing to this project? This can include any volunteering hours, costed at minimum wage rate.

MAN HOURS / PLANS ETC IN ACCORDANCE WITH TREES  
IN A CONSERVATION AREA (C.C.C.)  
NEGOTIATION WITH ARBICULTURALISTS  
SAFETY PROCEDURE IN PARK WITH STAFF  
NOTIFICATION OF CLOSURE OF PLAY AREA  
WITH COMMUNITY GROUPS





### Section Three: About your project

In this section, we want to know what your project is (i.e. what you want the grant funding for), and how that project will benefit the local community and support Kent County Council's objectives.

9. 'Our focus is on improving lives by ensuring that every pound spent in Kent is delivering better outcomes for Kent's residents, communities and businesses' (Increasing Opportunities, Improving Outcomes: Kent County Council's Strategic Vision 2015-20).

Please explain how your project meets one or more of the following outcomes from KCC's strategic statement:

#### Strategic Outcome One: Children and young people in Kent get their best start in life

Increasing resilience and providing strong and safe environments to successfully raise children and young people	<input checked="" type="checkbox"/>	Keeping vulnerable families out of crisis and more children and young people out of care	<input type="checkbox"/>	Helping to close the attainment gap between disadvantaged young people and their peers	<input type="checkbox"/>
Helping to ensure all children, irrespective of their background are ready for school at 5	<input checked="" type="checkbox"/>	Helping children and young people have better physical and mental health	<input checked="" type="checkbox"/>	Helping children and young people to be engaged, thrive and achieve their potential through academic and vocational education	<input type="checkbox"/>
Supporting young people's ambitions with choices and access to work, education and training opportunities	<input type="checkbox"/>				

#### Strategic Outcome Two: Kent communities feel the benefits of economic growth by being in-work, healthy and enjoying a good quality of life

Improving physical and mental health by supporting people to take more responsibility for their own health and wellbeing	<input type="checkbox"/>	Supporting Kent business growth by having access to a well skilled local workforce with improved transport, broadband and necessary infrastructure	<input type="checkbox"/>	Benefitting Kent's communities from economic growth and lower levels of deprivation	<input type="checkbox"/>
Helping Kent's residents to enjoy a good quality of life, and more people benefit from greater social, cultural and sporting opportunities	<input type="checkbox"/>	Helping to protect and enhance Kent's physical and natural environments so they can be enjoyed by residents	<input type="checkbox"/>	Supporting well planned housing growth so Kent residents can live in the home of their choice	<input type="checkbox"/>

#### Strategic Outcome Three: Older and vulnerable residents are safe and supported with choices to live independently

Supporting those with long-term conditions to manage their conditions through access to good quality care and support	<input type="checkbox"/>	Supporting people with mental health issues and dementia to be assessed and treated earlier, and supporting them to live well	<input type="checkbox"/>	Providing access to the advice, information and support needed by families and carers of older and vulnerable people	<input type="checkbox"/>
Supporting social inclusion of older and vulnerable Kent residents	<input type="checkbox"/>	Helping more people to receive quality care at home, avoiding unnecessary admissions to hospital and care homes	<input type="checkbox"/>	Enabling health and social care systems to work together to deliver better community services	<input type="checkbox"/>
Helping residents to have a greater choice and control over the health and social care services they receive	<input type="checkbox"/>				

10. Please tell us about the need for this project and how it will benefit residents in the area that you are applying.

Make sure you fully explain the need for your project and provide evidence to back this up. Describe the problems / issues you have identified and explain how your project addresses them. Please also illustrate the Social Value of your project.

TREES ARE IN AND AROUND A PLAY AREA  
USED BY HUNDREDS OF YOUNG CHILDREN  
ANNUALLY  
THESE TREES NOW NEED TO BE REMOVED  
FOR SAFETY REASONS  
THIS PLAY AREA ADJOINS A VIBRANT  
PRE-SCHOOL





11. When will the project start? State month and year. We do not offer retrospective funding without exceptional prior agreement	NOVEMBER 2020.	
12. Will your project be completed within six months from receipt of your grant? If No, please explain why below	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
N/A.		

#### Section Four: The cost of your project

In this section, we want to know how much grant funding you want and how it will be used.

13. What is the total cost of your project?	£ 3,228.00	
14. What is the total amount of grant funding you are seeking from KCC Members in this application?	£ 2,690.00	not including VAT
15. Please complete this table with details of your total project spend		
Breakdown of Spend	Total Cost (£)	Amount Applying to KCC (£)
QUERCUS ILEX BY PERGOLA	£	
QUERCUS ILEX CAR PARK	£ 1995.00	
QUERCUS ILEX DRIVE PLAY PARK	£	
	£	
QUERCUS ILEX MIDDLE OF PLAY PARK	£ 695.00	
VAT	£ 538.00	
	£	
<b>Total:</b>	£ 3,228.00	£ 2,690.00

(Add more rows if necessary)

#### VAT

You may need to pay VAT on purchases you make as part of your project; you must only include VAT in the amount you request from us if you cannot claim it back from HMRC



**Section Five: Other Information**

In this section, we want to know how your organisation / group will publicise the project, and if there is anything else that we should know about the project.

16. Please use the space below for any other information that is relevant to this application (eg confirmation that any necessary planning / landlord permission, or delegated authority, is in place/details of relevant policies in place e.g. safeguarding policy/DBS checks).

N/A.

17. If your application is successful, please explain what publicity is planned, and how you will give recognition of the support provided by KCC and the local County Member(s) in relation to this project.

PROJECT PROMOTED THROUGH LOCAL SOCIAL MEDIA

18. Do you need a copy of the KCC logo to use in your publicity?

Yes

No

**Section Six: Declaration and agreement**

- I confirm that I am authorised to sign this application on behalf of the organisation/group. The information provided in this application is correct to the best of my knowledge.
- I agree that the organisation/group will adhere to up-to-date safeguarding policies relating to any work with children, young people and/or vulnerable adults.
- I understand that, if any false or inaccurate information is provided in this application, or at any point in the life of any grant funding awarded, or if any fraud is identified, the County Council will actively seek recovery of the grant, and will provide details to fraud prevention agencies, to prevent fraud and money laundering.
- I agree that the organisation/group accepts, and will abide by, the full terms and conditions and the monitoring requirements of the Kent County Council Combined Member Grants Scheme (as set out in the Guidelines).
- I confirm that I have read and understood the Privacy Notice in Section One of this application form.
- I agree that a summary of the project and the funding awarded can be published on the KCC website.

Name:

Position in the organisation:

Date:

13.7.2020

Please return this form to:

Member Hub Support Officer email:  
KCC Combined Member Grant Scheme,  
Kent County Council  
Member's Desk, Sessions House, County Hall, Maidstone, Kent. ME14 1XQ



## For Office Use Only – Combined Member Grants Scheme Agreement Form

Subject: Allocation of Combined Member Grants – 2020-2021

District:

## Application details

Organisation / Group:

Project:

Amount requested: £

## FOR COMPLETION BY THE LOCAL KCC MEMBER:

I would like to support this project and would like to recommend a grant of: £

OR I do not wish to support this project for the following reason:

Reason(s):

I am aware of a disclosable pecuniary interest (DPI) or other significant interest (OSI) relating to this application. Please tick/delete as appropriate. Yes  No 

If Yes, please state the nature of the interest(s) below.

Nature of Interest(s):

## Recommendation by the Local KCC Member:

I (have declared above) / (do not have) any disclosable pecuniary interest (DPI) or other significant interest (OSI) relating to this application. I recommend and agree the above allocation from my delegated KCC Combined Member Grants scheme and the community benefit that it will bring in my Division / District / Kent (as set out on this application form):

Member's  
signature:

Date:

Name:

Division:

## For completion by the Member Hub Support Officer (MHSO):

I am aware of a disclosable pecuniary interest (DPI) or other significant interest (OSI) relating to this application. Please tick/delete as appropriate. Yes  No 

If Yes, please state the nature of the interest(s) below.

Nature of Interest(s):

Name &amp; signature:

Date:

Comment/Referred to  
Manager: Yes  No Countersignature if  
MHSO declares an  
Interest:

Date:

## Cabinet Member / Senior Officer approval:

I approve the allocation of £ under the KCC Combined Member Grants scheme

Signature:

Date:

Name:

Position  
within KCC: