

Grant Application Form

Please answer all questions



Gloucestershire
Historic Churches Trust

1. ABOUT YOUR CHURCH										
Name of church										
Address				Postcode						
Denomination			If C of E, which diocese?			Bristol <input type="checkbox"/> Gloucester <input type="checkbox"/>				
Population of Parish		On average, how many adults (18+) come to a main weekly service?								
Is your church listed?		YES	NO	Grade I: <input type="checkbox"/> Grade II*: <input type="checkbox"/> Grade II: <input type="checkbox"/> (select relevant box)						
Is your church normally open during the day?		YES	NO	If not, what arrangements are made for access?						
When was the last regular survey of your church?				Have its main recommendations been dealt with?			YES	NO		
If not please indicate your plans for addressing these:										
Is your church fully insured?		YES	NO	What arrangements are in place for regular clearing of gutters and pipes?						
Does your church make an annual contribution to GHCT?		YES	NO	Amount:						
Does your church take part in GHCT's annual Ride and Stride?		YES	NO	If yes, how much did your church raise in total last year?						
2. CONTACT DETAILS										
Name of main contact for the application:			Contact address:							
Contact email address:			To whom should any cheque be payable?							
Phone number:			Role in the church:							
3. YOUR PROJECT										
Please describe below the work for which you are seeking a grant										
Total cost of work including contingency		Professional fees								
VAT on works and fees		Total cost for project								

4. YOUR FUNDING PLAN				
How much money have you got already available for the project?				
How much do you expect to raise locally?				
How much VAT is recoverable on the work:				
What other grant applications have you made or are you planning to make? (complete details including allocated grants below)				
Funding body:	Planning to apply: <input type="checkbox"/> Awaiting results: <input type="checkbox"/> Grant offer:			
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Do you have a Friends organisation or other trust fund whose assets are not shown on your church accounts?	YES	NO	If so, please indicate the likely contribution to the project:	

5. CARRYING OUT THE WORK				
Have you obtained competitive tenders or quotations?	YES	NO	If no, when will you do so?	
Has a contractor been chosen?	YES	NO	Name of contractor:	
Is the work to be specified and supervised by your architect/surveyor?	YES	NO	Name of architect/surveyor:	
Have you obtained the following – please select one answer for each:				
Faculty or other denominational consent?	YES <input type="checkbox"/>	Applied <input type="checkbox"/>	Not required <input type="checkbox"/>	NO <input type="checkbox"/>
Approval of DAC (C of E cases)?	YES <input type="checkbox"/>	Applied <input type="checkbox"/>	Not required <input type="checkbox"/>	NO <input type="checkbox"/>
Planning permission for the work?	YES <input type="checkbox"/>	Applied <input type="checkbox"/>	Not required <input type="checkbox"/>	NO <input type="checkbox"/>
Listed building consent?	YES <input type="checkbox"/>	Applied <input type="checkbox"/>	Not required <input type="checkbox"/>	NO <input type="checkbox"/>

DISCLAIMER AND SIGNATURE	
I declare that the above information is complete and accurate to the best of my knowledge, and that any grant offered will be used exclusively for the purposes described above, unless agreed in writing with the GCHT Grants Secretary.	
Signature	Date

Please read the Guidance Notes carefully, and make sure you attach all the necessary documentation to your application.



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Historic Churches Trust**

Registered Charity Number: 1120266