

SWINFEN BROUN CHARITABLE TRUST
(Founded 1st April 1974)

Registered Charity No. 503515



APPLICATION FORM
AND
GUIDANCE NOTES FOR APPLICANTS

February 2013

GUIDANCE NOTES FOR APPLICANTS

Applicants are advised to read the following notes carefully prior to the submission of any application.

1. Aims of the Trust Fund (taken from the Trust Deed):

- (1) To provide or maintain or assist in the provision or maintenance of public halls, meeting places, playing fields, sports facilities for the public at large in the interests of social welfare, with the object of improving their condition of life, places for housing the arts, libraries, museums or other educational institutions to which the public have access.
- (2) To provide or maintain or assist in the provision or maintenance of public gardens or public open spaces.
- (3) To provide or maintain or assist in the provision or maintenance of equipment or items for use in or with any of the objects mentioned in (1) and (2) above.

NB

- (a) Assistance can only be given to schemes within the boundaries of the Lichfield City Council
- (b) Trustees normally seek to help organisations which help themselves
- (c) An effort is made not to overlap with support given by the Trustees of the Lichfield Conduit Lands Trust
- (d) In general it is the policy of the Trustees to support capital projects and not make payments of an income nature
- (e) No part of the Trust Fund shall be paid to or supplied for the benefit of an ecclesiastical charity or charity for the relief of poverty.

2. Submission of Applications:

Completed application forms, together with any other supporting documents should be sent to:

Jane Bethell
Administrator to the Swinfen Broun Charitable Trust
St Mary's Chambers, 5-7 Breadmarket Street
LICHFIELD
Staffs WS13 6LQ
WS13 7SW

Tel: 01543 267982
Email: clerk@swinfenbroun.org.uk
Web: www.swinfenbroun.org.uk

3. Consideration of Applications:

All applications will be acknowledged and applicants advised when the next Trustees meeting is to take place. Save in emergency the application will be considered at that meeting. Applicants will be notified of the Trustees' decision usually within seven days of the meeting. Each application will be considered on its merit; however applicants will be advised immediately in the event of the application clearly not meeting the criteria of the Trust Deed (see Guidance Note 1 above).

4. Conditions of Grant

- (i) Grant will only be paid against an appropriate invoice or evidence of expenditure incurred.
- (ii) Grant is time limited to two years from the date of the offer.
- (iii) It is requested that some form of recognition of the Trust's assistance should be acknowledged or displayed in some suitable form.
- (iv) The decision of the Trust is final and further correspondence will not be entered into.
- (v) The Trustees cannot commit themselves to repeat or renew any grant.



For Trust use only
Appn. No:.....
Year:.....
Meeting:.....

**SWINFEN BROUN CHARITABLE TRUST
APPLICATION FORM
(PLEASE USE BLACK INK & BLOCK CAPITALS)**

FULL NAME:

**ORGANISATION (if applicable):
POSITION:**

ADDRESS:

POSTCODE:

TELEPHONE NUMBER:

EMAIL:

PROJECT (Please describe in detail bearing in mind the aims of the Trust Fund (see Guidance Note 1 – continue overleaf if necessary):

PROJECT (Cont'd)

FINANCIAL DETAILS:

(i) What is the total cost of the project?

(ii) What other financial support do you have?

(iii) What other applications have you made (in particular to other Charitable Trusts in the City of Lichfield) and when do you expect you will know the outcome of those applications?

(iv) Amount of grant requested

(v) To whom should a cheque be made payable?

DECLARATION (please read carefully and then sign where indicated):

1. I declare that the information given in this application is true to the best of my knowledge, information and belief.
2. I agree to tell you if any other financial support is given or promised in respect of the project between the date of the application and the Trustees' meeting.
3. I agree to reimburse the Trust for any money received from the Trust in the event of the money raised for the project exceeding the anticipated costs thereof and as hereinbefore stated.
4. I agree to you enquiring of other Trusts in Lichfield as to whether or not they have or are likely to make a grant in my favour.
5. I agree to provide a copy of the last audited accounts with my application (**organisations only**).
6. I agree to abide by the conditions of grant (see Guidance Note 4).

SIGNED:.....DATED:.....