

# Area Committee Budget Proposal

Please read the **Guide to Area Committee budgets** before you fill in this form

*Then complete* Section 1: Budget Proposal.

*If you are proposing to deliver the project yourself, please complete* Section 2: Delivery agency as well. *We can help you with this or do it for you – see who to contact in the* **Guide to Area Committee budgets**.

*Continue or separate sheets if you need to, or expand the boxes if you are filling in the form electronically.*

## Section 1: Budget Proposal

1. Title of proposal

2. Short description of proposal. Please include information on **who will benefit, when they will benefit, and how we will know when the proposal has been successful.**

It is important that your answer to this question is clear, because we will only pay the costs when we can see evidence that the outcomes you describe here have been achieved. You can provide further details in your supporting information.

To provide security fencing around boundary of nature reserve to help stop vandalism and antisocial behaviour by vandals to neighbouring properties in Scott Street.

3. Have you provided additional supporting information?  Tick if yes

4. What is the cost to the Area Committee?

5. How have you estimated or calculated the cost? Please show each item of expenditure and say whether it is an estimate or an actual cost.

Item	Cost £	Estimate or actual cost?
Replacement of existing fence and removal of bushes	1,911.07	
<b>Total</b>	1,911.07	

6. Have you tried to get funding from this project from anywhere else, either in the Council or from another organisation? If so, please give details

7. Who proposed the project? Please provide contact details.

Name of contact person	Cllr Dale Keeling
Your position in organisation or group	Ward councillor
Name of organisation or group	
Address	
Phone number 079666 29546	Email keeld900@leicester.gov.uk

**Section 2: Delivery agency (this could be an organisation or an individual)**

8. Who will deliver the project? Please provide contact details.

Name of contact person	Robert James
Your position in organisation or group	LCC small works
Name of organisation or group	
Address	
Phone number 252 6158	Email

9. If your organisation is a community or voluntary organisation rather than a statutory organisation, such as the Council or the Police, have you got a written constitution?

Tick if yes

Please provide a copy  Office use

10. Declaration

I have read the *Guide to Area Committee Budgets* and I accept the arrangements described in that guide. I confirm that the information I have given on this form is true. I will inform the Council immediately if any of the information I have given on the form changes.

Name	Dale Keeling
Signature	
Date	