Ward Community Fund Proposal Form

Please read the Guide to the Ward Community Fund 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 the Ward Community Fund.

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

LEICESTER CONTROLL

| | d. Dindmek | Desmaral |
|---------|------------|----------|
| Section | 1: Budget | Proposal |

-5 MAR TEL

1. Name of Ward

ABBEY

REC MEMBERS UP 3

2. Title of proposal

COMMUNITY EVENT RESOURCE

3. Name of group or person making the proposal

MONMACRE EVENTS PLANNING PARTNERSHIP

4. Short description of proposal. Please include information on how the money will be spent, 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 if you want to.

WE WOULD LIKE TO PROMOTE & ENCOURAGE

COMMUNITY EVENTS THROUGHOUT THE YEAR AND REQUIRE

RESOURCES & EQUIPMENT FOR STAFE & VOLUNTEERS

AS WELL AS MEETING HEALTH & SAFETY

REQUIREMENTS AT PUBLIC EVENTS

WE EXPECT THESE RESOURCES TO BE USED

AT 40 - 200 EVENTS PER YEAR.

5. Have you provided supporting information?

Tick if yes

| 6 | What is | the | total | cost | to | the | Community | Meeting? |
|---|---------|-----|-------|------|----|-----|-----------|----------|
|---|---------|-----|-------|------|----|-----|-----------|----------|

£ 2160

 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? |
|--|-----------|--------------------------|
| STOWARDS HEALTH & SAFETY RESOURCES | €1060 | E |
| SAPETY BARRIER (HIRE LOST) + TEMP FENUNG | €200 | E |
| LIGHTING FOR EVENING EVENTS. | £ 400 | € |
| PA SYSTEM | £ 500 | E |
| Total | 2,60 | |

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

| No | | | |
|----|--|-----|--|
| | | 100 | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

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

| TERRY KNIC | | |
|---------------------|-------------|--|
| FRIENDS OF MOUNTACK | | |
| | | |
| | | |
| | | |
| | CHAIRPERSON | |

Section 2: Delivery agency (this could be a single person, group of people or a group or organisation)

Who will deliver the project? Please provide contact details.

| Name of contact person Your position in organisation or group | MICK LEDERMAN YOUTH & PLAY DEVELOPMENT |
|---|--|
| Name of organisation or group | MCWMACA OFFICER |
| Address | DEVELOPMENT ASSOCIATION |
| | 1111 11 010 |
| | 11.010 |
| | |
| 12 | |
| | Email |

11. Declaration

I have read the *Guide to the Ward Community Fund* 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 | 9, 10 | |
|------------------|---------------|--|
| Signature | MICK LEDGRHAN | |
| Date | 18.2.2010 | |
| Please send this | | |

Please send this completed form back to:

Karen Shelton, Member Support Team, 2nd Floor, Town Hall, Leicester City Council, LEICESTER, LE1 9BG.

| STEWARDIN | VG | KIT. | (ESK) |
|-------------------|-----|------|-------|
| HI VIS Jackets | × | 40 | 66 |
| Safety Glasses | × | 10 | 2 |
| Work Gloves | × | 40 | 5 |
| Litter Pickers | × | 6 | 6 |
| Torches * | × { | 40 | jet |
| First And Kits | × , | 2_ | 30 |
| Sound Level Meter | Ø | 1 | 5 . |
| Extension Leads | * ' | 2 | 2- |

£ 10