

Dún Laoghaire-Rathdown County Council

Universal Grant Scheme

2017

Events Grant

CRM No: _____
Date Received:

Internal Use only

Section 1 – Organisation Applicant Details

To be completed by ALL Organisations Applying for support

Organisation Details:

Name of Organisation: _____

Address of Organisation: _____

Contact Details of Organisation:

Main Phone Number: _____

Mobile Phone Number: _____

Email Address: _____

Name of main contact person: _____

Contact Person Address: _____

Contact Number(s): _____

Email Address: _____

Organisation Website: _____

Social Media:

Facebook Address: _____

Twitter Address: _____

Other Social media: _____

Electoral Ward: _____

Type of Organisation:

Arts Centre/Organisation

Business' Association

Community Group

Heritage

Sports Group

Tidy Towns Group

Residents' Association

Other (please specify) _____

Number of households: _____

Have you the appropriate policies in place regarding:

Child Protection Yes No

People with Disabilities Yes No

Other Policies (please specify):

Membership Details: Total Number of Members: _____

Age Breakdown of Members:

Please specify the number of members in each category:

0 – 9 years _____
10 – 14 years _____
15 – 18 years _____
19 – 21 years _____
22 – 54 years _____
55 + years _____

Committee / Volunteers / Organiser Details:

Number of paid staff:	Number of voluntary staff:
Part time: _____	Part time: _____
Full time: _____	Full time: _____

Membership fees - Cost per member: _____

Financial Status:

Incorporated	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Unincorporated	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Trust	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Other (please specify)	_____			
Tax / Vat Registered	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Tax / Vat Registered number	_____			
Charity Registered	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
Registered Charity Number	_____			

SECTION 2 - Conditions

Event Grants are for the support and promotion of cultural events throughout the Dún Laoghaire Rathdown area.

In addition to the general conditions and eligibility listed in the Grant Guidelines, the following apply to Event Grant Applications:

- 70 per cent of the funding will be provided in advance of the event. A report on the grant-aided activity must be submitted before the final draw down of grant-aid is made. Failure to do so could prejudice future applications. A template for this report will be provided and must be used.
- Should the planned event not take place the grant will not be paid. If the cancelation happens after the initial payment of 70% of the grant, the applicant will be liable for the full return of this payment to the Council

SECTION 3 – Event Details

ORGANISATION

Please provide a brief summary of the aims/objectives of your organisation (Max 500 words):

EVENT DETAILS

Title of Event: _____

Proposed Date of Event: _____

Provide a brief description about the event (please attach extra sheet if necessary)

Please confirm previous total funding granted (under any grant type) by Dún Laoghaire-Rathdown County Council:

Year Funding Received:	Name of Grant(s)	Amount Awarded
Funding Received 2013		€
Funding Received 2014		€
Funding Received 2015		€
Funding Received 2016		€

Budget & Project Funding

Total Amount of funding being applied for: € _____

Please provide a details costing of the project below. Add extra lines if necessary.

Type of Expenditure	Amount
	€
	€
	€
	€
	€
	€
	€
	€
<i>Total Expenditure</i>	€
Type of Income & Source of funding	Amount
2017 DLR Grant Scheme	€
	€
	€
	€
	€
	€
<i>Total Income</i>	€
Total Estimated Cost of Project / Event	€

If any income listed above is part of a grant(s) from another body please given details of what that grant application will cover here:

Please ensure ALL income and expenditure is detailed above. A separate sheet can be used to give a more detailed breakdown of your budget.

Check list for Event Grant Application:

- Complete Pages 1 to 2 of the Grant Application
- Completed pages 4 and 5 of the application
- Signed the Declaration on page 7
- Included a copy of a public liability insurance certificate
- Any additional information you feel supports your application

Please note, applications and supplementary materials will not be returned.

[Please go to Page 7 and sign the Declaration Form](#)

Declaration:

I declare that the information supplied in this proposal is accurate and complete. I understand that all information provided in respect of the Grant Application will be held electronically and may be made available to other Dún Laoghaire-Rathdown County Council Departments as appropriate.

It should be noted that the Freedom of Information Act applies to all records held by Dún Laoghaire-Rathdown County Council.

Name (Printed): _____

Signature: _____

Position: _____

Date: _____

Please ensure you have read the Grant Scheme Guidelines, which set out the terms and conditions for awarding and payment in full. A copy of the guidelines are available from the Council's website, www.dlrcoco.ie, under Grant schemes or can be requested by phone from the Grant Schemes Section on 01 204 7966 or by email to grantschemes@dlrcoco.ie

The closing date for submissions is **Monday the 17th October 2016**

No late applications will be accepted

Please return applications to: grantschemes@dlrcoco.ie

Or by post to: 2017 Grant Schemes
Corporate, Communications and Governance
Department
Dún Laoghaire-Rathdown County Council
County Hall
Marine Road
Dún Laoghaire
Co. Dublin

All queries should be directed to the Grant Schemes section by email or phone:

Email: grantschemes@dlrcoco.ie Phone: (01) 204 7966

Please ensure you read through the following application in detail as any incomplete applications will be returned.

Only one Grant per application form please

Multiple applications will be accepted but may not all be awarded. Please submit a separate application for each grant you wish to be considered for.

