

**Community Recognition Fund 2024**

**Funding Proposal Form**

**Closing Date: Monday 16th September 2024 at 5:00 pm**

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| **Applicant Group/Organisation:** |  |
| **Contact Person** (liaison for entire funding proposal) |  |
| **Role of Contact Person:** |  |
| **Group / Organisation address for correspondence:**  |  |
| **Eircode:** |  |
| **In which area (s), prioritised for Community Recognition Fund 2024 support by dlr County Council, do you operate in:** | **Ballyogan Blackrock****Dundrum Sandyford** |
| **Group / Organisation Email address:** |  |
| **Group / Organisation mobile number:** |  |
| **Group / Organisation landline number:** |  |
| **dlr Public Participation Number (if applicable):**  |  |
| **Main objective of Group / Organisation:**  |  |
| **Confirmation of Group / Organisation Appropriate Insurance**  | **Yes NO**  |

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| **Outline details of the project that funding will be used for:**  |  |
| **Outline how the proposed project will deliver tangible benefits to the community:** |  |
| **Confirm location where funding will be used / project will be situated:** | **EIRCODE (if available):**  |
| **Total Estimated Costs of Project –** *breakdown of costs and evidence of at least 3 quotations sought and / or QS estimate must be submitted:* | **€** |
| **Total amount of funding being applied for: (Minimum €50,000 – Maximum €500,000)***Complete and return Appendix A for applications over €200,000.* | **€** |
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| **If there is a shortfall in funding sought for this project from overall costs, please state how you will make up for this shortfall:** |  |

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| **Has any element of this proposal previously been approved under a Government Department scheme?** If so, please outline. | **Yes NO** |
| **Please provide a detailed outline of the proposed procurement plan for the project** *Please include name of Procurement Consultant/Personnel, if applicable* |  |
| **Proposed timeframe associated with Project:** |  |

**Use of Data:**

The information on this form will be used by the Department of Rural and Community Development for the purposes of processing the application. Further information may be sought by the Department to clarify aspects of the project proposal. The form may be shared with other Government Departments for assessment purposes. The Department may draw on broader, more specialist expertise where required, and such information as considered necessary to complete an assessment of your proposal may be shared with those experts.

The Applicant and the Department are subject to the data protection and privacy laws of Ireland and the EU, in particular the Data Protection Act 2018 and Regulation (EU) 2016/679, known as the EU General Data Protection Regulation (“GDPR”). Any personal information which you provide as part of the application process will be obtained and processed in compliance with Data Protection legislation.

The Department retains the right to disclose for the purposes of a request under the Freedom of Information Act 2014 or otherwise, in connection with the funded project(s) –

i. any information supplied by the Applicant to the Department, and

ii. any relevant data gathered by the Department in administering grant aid to the project, except where the information is considered to be personal or commercially sensitive.

**Declaration by Applicant:**

This declaration must be signed by an officer authorised at a senior level within the lead applicant organisation

I confirm that I have read and understood this document and declare that the particulars supplied in this funding proposal are true and correct and that –

• The costings are accurate and reasonable.

• All necessary permissions are in place e.g. planning consent etc.

• All relevant ecological survey work (if applicable) has been undertaken or will be undertaken e.g. Appropriate Assessment screen.

• There is evidence of ownership (if applicable) or the consent of the landowner.

• The project will comply with Public Procurement Guidelines.

• The project conforms to the [LECP](https://www.dlrcoco.ie/community/dlr-local-community-development-committee) and other local or regional plans.

• No funding has been allocated for the same works from any other sources.

Proof of the above is not required at the time of application but must be available to the Department or its agents on request.

I acknowledge the information regarding the use of data set out above and give consent to the Department of Rural and Community Development for the sharing of all information, personal or otherwise, contained in this funding proposal and any attachments accompanying it, in accordance with the uses of the data and information provided above.

**I declare that the information provided by me on this application form is truthful and complete. I request that consideration be given in support of the project as outlined above.**

**Signed:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Print Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Position in Organisation:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Must be Chairperson or CEO/MD**)

**APPENDIX A**

**Community Recognition Fund (CRF) 2024**

**Business case for each Project Over €200,000**

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| **Project name** |
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| **City, town or village name** |
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| **Summary of the proposal** |
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| **Project rationale & rationale for selecting this location** |
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| **Outline the community engagement and consultation** |
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| **Outline the capacity of the group to deliver the project as outlined.**Include details of the track record of project partners and experience of delivering similar projects |
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| **Identified needs this project will aim to address** |
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