

**NEWRY, MOURNE & DOWN DISTRICT COUNCIL**

**FINANCIAL ASSISTANCE 2016/2017**

**CAPITAL CALL FOR**

**COMMUNITY, SPORTING AND RECREATION CAPITAL SCHEMES**

|  |
| --- |
| **Guidance notes on completing the**  **Application for Funding** |

|  |
| --- |
| **Closing Date: Friday 11th March 2016 at 4pm**  **Applications must be delivered to either the Council’s reception at:**  **O’Hagan House**  **Monaghan Row**  **Newry**  **Or**  **Downshire Civic Centre**  **Downshire Estate**  **Ardglass Road**  **Downpatrick** |

**General Guidance Notes for 2016/2017 Financial Assistance**

**(Capital Call)**

* + 1. **Introduction**

The Newry, Mourne and Down District Council invite applications for financial assistance towards community, sporting and recreation capital infrastructure projects by the community and voluntary sector.

This document is designed to provide guidance to organisations who are contemplating applying for funding under the Newry, Mourne and Down District Council Capital Call Financial Assistance Programme. Please note applicants can apply for up to **50%** of the costs.

* The year under consideration is 2016/2017 (i.e. 1st April 2016 to 31st March 2016). Applicants must ensure they are completing 2016/2017 “Capital Call” application forms. Any other forms submitted will not be considered and will be rejected. All projects must take place between **1st April 2016 and 31st March 2017.**
* The closing date for applications is **4pm on Friday 11th March 2016**. Applications must be delivered to either the Council’s reception at O’Hagan House, Monaghan Row, Newry or reception at Downshire Civic Centre, Downshire Estate, Ardglass Road, Downpatrick. Late applications will not be considered.
* The programme area in this call is restricted to:
  + 1. Community, Sporting and Recreation Capital Infrastructure Projects only.
  + Defined as – Contributions of up to **50%** of the costs, towards match funding of community, sporting and recreation capital infrastructure schemes proposed by the community and voluntary sector.

Projects must deliver Capital Infrastructure Projects, see examples of eligible and ineligible items outlined below. Please note: these lists are not exhaustive.

|  |  |
| --- | --- |
| **Eligible – Capital Costs (examples).** | **Ineligible – Revenue Costs and non fixed items (examples).** |
| Capital Building Works | Rent/Rates |
| Building Construction and Landscaping | Staff Costs |
| Extensions | Running Costs e.g. heat / electricity |
| Essential Professional Fees associated with capital building works | Maintenance Costs |
| Renovations | General Office Equipment e.g. Tables / Chairs / Stationary |

* Consideration will only be given to projects seeking funding of a **minimum of £15,000 and a maximum of £50,000** from the Council.
* The Council will not accept retrospective applications (i.e. applications seeking funding for projects already started prior to 1st April 2016).
* Applicationforms need to be completed as per the programme area on the covering page of the application.
* The Council will only consider one application per organisation.
* It is essential that applicants submit a copy of their Annual Audited Accounts or Income and Expenditure Accounts with the application.
* Council will pay only the agreed sum against each original invoice whenever all relevant conditions have been met and bank statements evidencing expenditure have been submitted.
* “Own labour” and hire of “own facilities” are not eligible items of expenditure.
* Insurance costs are not eligible items of expenditure.
* Where applications are made for projects that are outside of the Council’s legal power to provide funds (ultra vires), then such applications will not be considered.
* The Council will make the final decision on the provision of funding for all/any projects. Where an organisation has been allocated funding, payment will be subject to the organisation adhering to the conditions contained within their letter of offer.
* This is a competitive process and applicants will be awarded in line with their score and the funding available.
* Successful Applicants - Please note that Council will require a ‘Deed of Covenant & Charge’ over successful applicant’s land/property.

**B. Assessment process and criteria**

Newry, Mourne and Down District Council will consider all eligible applications. The assessment panel will make recommendations on whether applications fulfill the funding criteria and the level of funding awarded. The assessment panel recommendations are submitted to Council for approval. Assessment will take place in two stages:

**Stage 1: Basic eligibility check**

All project applicants **must** meet the following basic eligibility criteria – otherwise the application **will not progress** any further in the appraisal process and **will not** therefore **be scored.**

|  |
| --- |
| * Application forms must be submitted by hard copy and received by **4pm Friday 11th March 2016**. As per cover page. * The Applicant in the application should be a properly constituted community or voluntary organisation and be a not for profit organisation and the appropriate documentation must be included as evidence. As per Section 1.2. * The organisation must include a copy of their Safeguarding policy (if applicable). As per 1.3. * The organisation must enclose a copy of their most recent bank statement. As per Section 1.4. * The organisation must enclose a copy of either their recent annual audited accounts or income and expenditure accounts. As per Section 1.4. * The project must be within the allocated funding period for the programme or service area applied for and attach a timeframe plan and cashflow. As per Section 2.2 and 2.4. * The project activity must be within the eligible area (Newry, Mourne and Down). The beneficiaries must be from the Newry, Mourne and Down area. As per Section 2.3. * The projectmust clearly identify how the proposed project will compliment the specific programme applied under and the Council’s strategic priorities. As per Section 2.5. * Applicants must be applying for a **minimum of £15,000 and maximum of £50,000** from the Council As per Section 3. * The organisation must include evidence to show that match funding (minimum of 50%)is in place e.g. confirmation of bank loan, bank statements or letter of offer or intent showing own/other funds available. As per Section 3.3. * Applicants must demonstrate that they will have secured 100% of the funding required for the project to be completed inclusive of this application. As per Section 3.3. * The organisation must include evidence of land ownership and/or legal title to property confirmed and in place. As per Section 3.9. * The organisation must include evidence that statutory approvals and permissions are in place. As per Section 3.9. * The organisation must include a copy of the Business Case/Economic Appraisal completed (if applicable). As per Section 3.9. * The organisation must include evidence of site Surveys completed and Risk Assessed. As per Section 3.9. * The organisation must include evidence of Design Brief approved. As per Section 3.9. * Applications forms must be appropriately signed. As per Section 5. |

**Stage 2: Full Project Appraisal and Scoring**

All applications passing Stage 1 basic eligibility check, will proceed to a “Full Project Appraisal and Scoring” carried out using the following criteria, process and scoring system. The assessment panel then makes a recommendation to the Council for consideration/approval. All eligible applications will be assessed against the pre-set criteria agreed by Council. All applications will be scored out of 120. An application must score a minimum of 50% under Programme and Priority Criteria and Efficiency and Effectiveness criteria as well as under the cross cutting themes before it can be considered for funding. Projects under 50% will not be recommended for support.

However, a score equivalent to 50% or above will not necessarily guarantee funding as applications will be scored and ranked with funding available awarded to the highest ranked projects. Thereafter a project may be reconsidered and allocated funding should it become available at a later date.

For consistency and to facilitate efficient assessment the following approach has been adopted to scoring against the following criteria:

|  |  |  |  |
| --- | --- | --- | --- |
| **Criterion** | **Maximum** | **Weighting** | **Weighted Final Score** |
| **Council & Programme or Service Area.** |  |  |  |
| Fit with the new Council’s overall Strategic priorities (Question 2.5) | 12 | x 1 | 12 |
| Fit with the programme or service area being applied for (Question 2.5) | 12 | x 1.5 | 18 |
| Impact on the local community (Question 2.6) | 12 | x 1.5 | 18 |
| **Efficiency & effectiveness** |  |  |  |
| Added value (Question 2.7) | 12 | x 1 | 12 |
| Value for money (Question 2.6 and Section 3) | 12 | x 1.5 | 18 |
| Need (Question 2.8 | 12 | x 1.5 | 18 |
| **Cross cutting themes** |  |  |  |
| Equality of opportunity (Question 2.9) | 12 | x 0.5 | 6 |
| Good Relations (Question 2.10) | 12 | x 0.5 | 6 |
| Empowerment (Question 2.11) | 12 | x 0.5 | 6 |
| Impact on poverty, social need and health and well being (Question 2.12) | 12 | x 0.5 | 6 |

In addition the following scoring system will be used by the panel to ascertain the scores for the criteria above:

|  |  |  |  |
| --- | --- | --- | --- |
| **Link at project level** | **Link to Criterion** | **How evident** | **Score** |
| The project proposal does not demonstrate that it has the capacity to deliver basic project outcomes that would be expected in order to be awarded funding. | The application does not meet the basic standard under this criterion | Not evident | 0 |
| The project proposal demonstrates some ability to deliver key outcomes in some areas but overall it is below the standard expected in order to be awarded funding. | The application met some of the basic requirements of this criterion. | Less evident | 1 – 3 |
| The project proposal demonstrates an ability to deliver project outcomes to an acceptable standard and it may be considered suitable for funding. | The application met the requirements of this criterion. | Evident | 4 – 6 |
| The project proposal is strong in the manner in which it has been described with a range of activities that will result in good outputs and the achievement of outcomes. | The application fully met the requirements of this criterion. | Very Evident | 7 – 9 |
| The project proposal is strong as the activities described will result in good outputs and the achievement of outcomes. | The application was an excellent fit with the requirement of this criterion. | Highly evident | 10 – 12 |



**NEWRY, MOURNE AND DOWN DISTRICT COUNCIL**

**CAPITAL CALL**

**2016 - 2017**

**Application Form**

**The closing date for receipt of completed application forms is:**

**4pm on Friday 11th March 2016.**

**No applications will be accepted after the closing date.**

**It is your responsibility to obtain a proof of receipt.**

**Only one application per organisation will be considered.**

**This application form is also available in large print/audio/Braille/Irish language upon request.**

|  |
| --- |
| Community, Sporting, Recreation Capital Infrastructure Projects |

|  |
| --- |
| **For office use only:**  Date received:  Reference number:  Government funding database reference number: |

**Important information when completing your application.**

1. You are advised to complete the Application Form in conjunction with the Council’s guidance notes and scoring criteria.
2. The project will be assessed solely on the information provided within the application. Therefore ensure your application is completed in a comprehensive, detailed and legible manner.
3. Applications should be completed in black ink or computer format.
4. Additional information should only be attached where requested. Any additional material provided which has not been requested will not be considered.
5. Applicants must ensure the application form is signed and dated.

For further clarification in relation to the completion of the application you can contact :

Sonya Burns

Programmes Manager

Newry, Mourne and Down District Council

Telephone Number: 028 3031 3024

**Section 1** Your Organisation

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **LEAD PARTNER** | | | | | |
| * 1. **Contact Details: (The information provided must be accurate and Newry, Mourne and Down District Council must be notified of any changes).** | | | | | |
| **Title (Mr, Mrs, Miss, Ms etc)** |  | **First Name** |  | **Surname** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Position in organisation:** |  | **Contact Number:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Organisation Name:** | |  | | |
| **Address:** |  | | | |
|  | | | | |
|  | | | | |
| **Postcode:** |  | | **Telephone:** |  |
| **E-mail:** |  | | **Website:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Contact details for this project (if different from above)** | |  | | |
| **Address:** |  | | | |
|  | | | | |
|  | | | | |
| **Postcode:** |  | | **Telephone:** |  |
| **E-mail:** |  | | **Website:** |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **1.2 What is the legal status of your organisation? Enclose a copy of the relevant documentation as evidence.** | | | | |
| Voluntary/Community body |  | Other (Please specify) |  | |
| Co-operative |  |  |  | |
| Registered Charity:  Charity Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  | |
| Limited Company (including company limited by guarantee)  Company registration number:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place of Incorporation:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |  |  |  | |
| **1.3 Will the project involve children and vulnerable adults? If yes, please enclose a copy of your Safeguarding policy.**  **If your project does not require a safeguarding policy you must state the reason why.** | | | |
| |  | | --- | |  |   Yes Please enclose a copy  No   |  | | --- | |  |   Reason\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | |
| **1.4 What is the annual accounting position of your organisation?** | | | |
| Audited accounts (Please enclose most recent copy)   |  | | --- | |  |   Income & Expenditure (Please enclose most recent copy)   |  | | --- | |  |   Each application must include a copy of their most recent bank statement, and a copy of either their recent annual audited accounts or income and expenditure accounts. If this is not enclosed your application will not be processed. | | | |

|  |
| --- |
| **1.5 Please describe your organisation and provide examples of previous initiatives or projects.** |
|  |

|  |
| --- |
| **1.6 Organisational Information.** |
| Date of formation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Chairperson: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Secretary: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Treasurer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Section 2** About Your Project

|  |  |
| --- | --- |
| **2.1 Project Title:** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **2.2 Start and end date of your project** | | | |
| Start date | \_\_/\_\_/\_\_\_\_\_ | End date | \_\_/\_\_/\_\_\_\_\_ |

|  |
| --- |
| **2.3 Please also indicate the project’s primary area of benefit within Newry, Mourne and Down District Council by ticking the relevant areas below**  **Note: The Council will only fund activities for beneficiaries in the Council area or activities based in the area.** |
| Crotlieve ­­­­­­­­­­­­­­­­­­­\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Slieve Croob \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Downpatrick \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Slieve Gullion \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Newry \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Rowallane \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  The Mournes \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

|  |
| --- |
| **2.4 Give a brief description of your project outlining specific aims and objectives and cashflow and timeframe for delivery.**  **Applicants must attach a copy of the cashflow and timeframe plan.** |
|  |

|  |
| --- |
| **2.5 Clearly identify how the proposed project will compliment the specific programme applied under *and* the Council’s strategic priorities?** |
|  |

|  |
| --- |
| **2.6 Outline the outcomes and benefits of your project for the local community. Provide targets e.g. number participating, number of events etc.** |
|  |

|  |
| --- |
| **2.7 How is the proposal/idea new or how does it build on a current or previous project to address continued needs?** |
|  |

|  |
| --- |
| **2.8 What need is being met by this project? How did you establish this need?** |
|  |

|  |
| --- |
| **2.9 How will the initiative improve equality of opportunity? Please detail what actions will be undertaken which will contribute to improving equality of opportunity.** |
|  |

|  |
| --- |
| 2.10 How will the initiative promote good relations? Please detail what actions will be undertaken which will contribute to improving good relations. |
|  |

|  |
| --- |
| **2.11 How will the project empower the local community building capacity for future self help?** |
|  |

|  |
| --- |
| **2.12 Please detail what actions you will be undertaking to address social needs, health and wellbeing and impact on poverty.** |
|  |

**Section 3** Project Budget

|  |  |
| --- | --- |
| **3.1 Total Cost of Project:** | **£** |
| **3.2 Amount Requested from Newry, Mourne & Down District Council:**  **Must be between (£15,000-£50,000)** | **£** |
| Is the Applicant Organisation/Lead Partner registered for VAT?  Please note that if registered for VAT you should normally exclude VAT from the project costs. If you are not registered for VAT please include VAT along with the costs detailed in your project budget) | **Yes / No**  **Please provide details:** |

|  |  |  |  |
| --- | --- | --- | --- |
| **3.3 Applicants will require a minimum of 50% match funding.**  **Please list any other organisations that you have secured the match funding from. Give any relevant reference numbers.**  **The organisation must include evidence to show that match funding (minimum of 50%) is in place and that including this application 100% of the funding has been secured to complete the project e.g. confirmation of bank loan, bank statements or letter of offer or intent showing own/other funds available.** | | | |
| **Organisation** | **Funding Programme (Include reference number)** | **Amount received** | **Period of Funding (start-end dates)** |
|  |  | £ |  |
|  |  | £ |  |
|  |  | £ |  |
|  |  | £ |  |
|  |  | £ |  |

|  |  |  |
| --- | --- | --- |
| **3.4 Will this project generate revenue? If yes, provide details below** | | **Yes / No** |
| **Year** | **Source** | **Amount** |
|  |  | £ |
|  |  | £ |
|  |  | £ |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **3.5 Please provide a fully costed budget with a breakdown of all costs. Please detail which elements of your project you wish the Council to fund. Note the Council will only pay grant monies against headings and figures detailed below.** | | | | |
| **Capital Costs** | **Items of Expenditure** | **Cost**  **£** |  | **Council Contribution sought £**  **( Max 50% of cost )** |
|  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  |  |  |  |
|  | **TOTAL BUDGET** |  |  |  |

**BANK ACCOUNT DETAILS:**

**3.6 Name of Bank: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3.7 Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**3.8 Current Account/Savings Account Number:** (Please specify type of account)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* 1. **All capital contributions applicants (where applicable per application) must provide evidence of the following**:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **APPLIED FOR** | | **CONFIRMED** | |
| 1. **Land Ownership and/or Legal Title to the Property** | **Yes** | **No** | **Yes** | **No** |
| 1. **Planning Permission** | **Yes** | **No** | **Yes** | **No** |
| 1. **Building Control Approval** | **Yes** | **No** | **Yes** | **No** |
| 1. **Business case or Economic Appraisal completed** | **Yes** | **No** | **Yes** | **No** |
| 1. **Site Surveys and Risk Assessments** | **Yes** | **No** | **Yes** | **No** |
| 1. **Design Brief** | **Yes** | **No** | **Yes** | **No** |
| 1. **Other relevant statutory permissions**   **(please name below)** | **Yes** | **No** | **Yes** | **No** |

**Section 4 –** Checking it’s all there

Ensure you have fully adhered to the basic eligibility checklist, and have answered all questions and have completed all sections in the application form. All relevant documentation as outlined below must be attached.

I enclose a copy of organisation’s constitution or other appropriate

documentation, (as per 1.2).

I enclose a copy of organisation’s Safeguarding policy (applicable if project

involves children and vulnerable adults) (as per 1.3).

I enclose a copy of my organisation’s most recent annual audited accounts or

income and expenditure accounts, (as per 1.4).

I enclose a copy of my organisation’s most recent bank statement, (as per 1.4).

I enclose evidence of match funding. (Min 50 %) (as per 3.3).

I enclose confirmation of VAT status (if applicable), (as per 3.2).

I enclose written evidence of agreement of partners to participate in

project (if applicable).

I enclose the minutes of my organisation’s meeting authorising the submission

of the grant application.

I enclose copy of economic appraisal or business case (if applicable, as per 3.9). .

I enclose copy of legal title to property (if applicable, as per 3.9).

I enclose copy of planning permission (if applicable, as per 3.9).

I enclose copy of building control approval (if applicable, as per 3.9).

I enclose a copy of the design brief (as per 3.9).

I enclose a copy of site surveys and risk assessments (as per 3.9).

I enclose evidence of statutory approvals and permissions (as per 3.9).

I confirm that the organisation operates on a not-for-profit basis unless the

organisation has charitable status or all profits are reinvested in the organisation,

in furtherance of its objectives and are not distributed by way of profit,

dividend or otherwise to the organisation’s shareholders, members, owners,

stakeholders or anybody else connected with the organisation.

I confirm that sufficient insurance cover has been sought for the project

and that Newry, Mourne & Down District Council is not responsible for providing

insurance for, or claims which arise from, grant-aided programmes.

**Section 5** Declaration

I confirm that the information I have given on this application form is accurate and complete.

I acknowledge that if I give misleading or inaccurate statements on behalf of the group or organisation, we may not receive any financial assistance or it may be withdrawn and have

to be refunded to Newry, Mourne and Down District Council.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title (Mr, Mrs, Ms, Miss etc) |  | First name (Please print) |  | Surname (Please print) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

|  |  |
| --- | --- |
| Your position within the organisation: |  |

**Must be completed by** 2 **Office Holders.**

I confirm that the person named at Section 1 is authorised to act as the contact for the organisation in all matters relating to this application.

**1.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title (Mr, Mrs, Ms, Miss etc) |  | First name (Please print) |  | Surname (Please print) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

|  |  |
| --- | --- |
| Your position within the organisation: |  |

**2.**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title (Mr, Mrs, Ms, Miss etc) |  | First name (Please print) |  | Surname (Please print) |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Signature: |  | Date: |  |

|  |  |
| --- | --- |
| Your position within the organisation: |  |

**Note:** The information provided on this form may be made available to other departments/ agencies for the purposes of preventing or detecting fraud.

**Data Protection Act 1998**