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**LOCAL CIL FUNDING ALLOCATION APPLICATION FORM**

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| **Please submit to:**[CIL@epsom-ewell.gov.uk](mailto:CIL@epsom-ewell.gov.uk). | | | | |
| **NAME OF PROJECT** | |  | | |
| **BRIEF DESCRIPTION OF PROJECT** (Please keep this description factual and brief – Part A of this form allows you to explain its merits) | |  | | |
| **PROJECT ADDRESS (please provide a full address and plan/map identifying the location)** | |  | | |
| **ORGANISATION or GROUP MAKING THE BID** | |  | | |
| **WHO WILL BE RESPONSIBLE FOR MANAGING / IMPLEMENTING THIS PROJECT**  **Please give a named contact, address, phone number and email** | |  | | |
| **Part A Project Benefits *(****further guidance can be found in part 8 (2, page 22 CIL Spending Protocol)* | | | | |
| 1. **Please describe the project and its purpose and why you would like to deliver this project** | | | | |
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| 1. **Who will benefit from the project?** | | | | |
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| 1. **Please Identify the new development that has led to the need for this project arising?** | | | | |
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| **Part B Funding Breakdown & CIL Funding Request** *(further guidance can be found in part 8 (3),p22&23 CIL Spending Protocol)* | | | | |
| 1. **Please state the amount of CIL funds that you would like to allocate** | | | | |
| **Funding source breakdown** | **Amount (£)** | | **%Overall cost** | **Source** |
| **Total project cost** |  | |  |  |
| **Total match funding** |  | |  |  |
| **Requested CIL funding** |  | |  |  |
| 1. **Which elements of the project are you seeking CIL funding for?** | | | | |
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| 1. **Further notes to clarify breakdown if required** | | | | |
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| 1. **Has the facility or your organisation benefited from CIL funding previously?** | | | | |
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| 1. **Does your group have its own bank account?** | | | | |
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| **Part C Project Delivery** *(further guidance can be found in part 8 (4),p23 &24) CIL Spending Protocol)* | | | | |
| 1. **Will your group/organisation be managing the delivery of the project?** | | | | |
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| 1. **Please indicate the timetable for the delivery of this project, including key milestones?** | | | | |
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| 1. **Does your organisation own the land/building/facility in questions? Do you need and have planning permission to implement the project?** | | | | |
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| 1. **Please specify who will be responsible for ongoing maintenance and how this will be funded** | | | | |
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| **Part D Summary of your bid** | | | | |
| *Please summarise your bid in the box below in* ***no more than 300 words****. Ensure you cover the key points from the main body of the form so that it can stand alone.*  *Please note anything you include in this section is likely to form part of public papers in deciding your bids.* | | | | |
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| **Part C List of additional material submitted in support of this bid** | | | | |
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| **Part D: Declaration and Privacy Notice** | | | | |
| When you have completed the application please indicate your acceptance of the statements below by signing and printing your name where shown before submitting the application as directed on the cover sheet.    To the best of my knowledge the information I have provided on this application form is correct.    Privacy Notice: I agree to Epsom & Ewell Borough Council checking all supplied information for the purposes of informing decision making. The information on this form will be stored in the Council’s manual filling system and summarised in the Council’s ICT system for the sole purpose of fund processing, analysis and accounting. Information about the project may be publicised on the Council’s website for publicity purposes. Personal data will not be disclosed without any prior agreement of those concerned, unless required by law. For further information on the Council’s privacy policy, please see the EEBC’s privacy notice on the website.  www.epsom-ewell.gov.uk/privacy-and-cookies    Signed by:  Date:      Print Name: | | | | |