## SURREY HEATH BOROUGH COUNCIL COMMUNITY GRANT APPLICATION FORM

COMPLETED APPLICATIONS MUST BE RETURNED TO: COMMUNITY PARTNERSHIPS OFFICER SURREY HEATH BOROUGH COUNCIL SURREY HEATH HOUSE KNOLL ROAD CAMBERLEY SURREY GU15 3HD

| OFFICE USE ON APPLICATION N |  |
|-----------------------------|--|
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| T.  | į, | APPLICATION FOR A COMMUNITY FUND GRANT  |
|-----|----|---|
| 1.  |    | YOUR ORGANISATION   |
| 1.1 |    | Organisation Name: CAMBERLEY CRICKET CLUB                                     |
| 1.2 |    | Principal Contact Name: KEITH HALSEY (CHAIRMAN)                               |
| 1.3 |    | Organisation Contact Address (for correspondence related to the application): |
|     |    | UPPER VERRAN ROAD<br>CAMBERLEY  |
|     |    | Post Code: GU15 2JL   |
|     |    | Daytime telephone no: 07796 417498  |
|     |    | E-mail address: kljhalsey@sky.com   |
|     |    | Amount applied for : £12,750  |
| 1.4 |    | Please confirm your organisation is 'not for profit' YES                      |
| 1.5 |    | Organisation Type (please tick): Formally constituted Club/Association/Trust  |
|     |    | Other public sector body  |
|     |    | School/college  |
|     |    | Other   |
| 1.6 |    | How many members are in your organisation? up to 25 26-50 51-75               |
|     |    | 76-100 101+   |
| 1.7 |    | How long has the organisation existed? 1945                                   |

- 1.8 Are you a registered charity? NO (If yes, please state the charity number)
- 1.9 Are you VAT registered? YES: 212 3006 35 (If yes, please state VAT number)
- 1.10 Are you affiliated to a national organisation? ENGLAND & WALES CRICKET BOARD
- 1.11 If yes, have you applied to them for funding? NO
- 1.12 If not, please state your reasons for not doing so :

RELATES TO NON CRICKETING ACTIVITIES.

1.13 Please state where your funding comes from:

MEMBERSHIP SUBSCRIPTIONS AND RENTAL INCOME

## 2. PROJECT DETAILS

1.

2.1 Please describe the project in as much detail as possible. The information provided should accord with your Business Plan.

THE BUILDING'S ORIGINAL DISABLED LIFT HAS BECOME UNRELABLE AND IS IN CONSTANT NEED OF REPAIR AND MAINTENANCE. IN RECENT MONTHS THE LIFT HAS BROKEN DOWN ON SEVERAL OCCASIONS WHICH AT TIMES HAS LEFT VISITORS WITH MOBILITY SCOOTERS STRANDED ON THE TOP FLOOR UNTIL WE COULD FIX THE LIFT.

THE LIFT ENGINEERS HAVE NOW REPORTED THAT REPAIRS ARE NOW INCREASINGLY DIFFICULT AND THAT WE SHOULD REPLACE THE LIFT.

THIS LIFT IS IN CONSTANT USE IN OUR FACILITY.
WE HIRE OUT OUR PREMISES TO A NUMBER OF COMMUNITY GROUPS INCLUDING:

CAMBERLEY ROTARY CLUB
CAMBERLEY U3A BRIDGE AND FLOWER ARRANGING CLUBS
CAMBERLEY ROCK CHOIR
CAMBERLEY WEIGHT WATCHERS
CAMBERLEY & FARNBOROUGH HOCKEY CLUB
CAMBERLEY BRIDGE CLUB

IN ADDITION WE HIRE OUT OUR FACILITY TO A LARGE NUMBER OF LOCAL RESIDENTS OF SHBC FOR THEIR BIRTHDAY PARTIES, WEDDING OR WAKES .

AS YOU MAY APPRECIATE FROM OUR USAGE GROUPS A LARGE NUMBER OF OUR GUESTS ATTENDING BOTH OUR REGULAR WEEKLY HIRING MEETINGS AND COMMUNITY CLEBRATIONS ARE QUITE ELDERLY.

WE ARE BECOMING INCREASINGLY AWARE THAT SHOULD THE LIFT FAIL TO OPERATE, AS IT HAS DONE IN RECENT MONTHS, THEN OUR HEALTH AND SAFETY OF OUR VISITORS IS AT RISK.

| 2.2  | What is the timescale of the project? Start Date: NOVEMBER 2016   |  |
|--|---|--|
|  | Completion Date: MARCH 2017   |  |
| 2.3  | Who will benefit from the project, the wider community or a small section?  |  |
|  | WIDER COMMUNITY OF SURREY HEATH.  |  |
|  |   |  |
| 2.4  | Please describe your current facilities.  |  |
| À LARGE PLAYING AREA FOR USE BY ALL AGES AND BOTH GENDERS FOR THE ENJOYMENT OF PLAYING, LEARNING OR SIMPLY TO WATCH THE GAME OF CRICKET. |   |  |
| WITH<br>USED<br>FLOOI  | AVILION IS A TWO STOREY BUILDING WITH A DOWNSTAIRS MEMBERS' AREA CHANGING ROOMS AND A LARGE FUNCTION ROOM UPSTAIRS WHICH IS BY COMMUNITY GROUPS AND LOCAL RESIDENTS. ACCESS TO THE UPPER R IS REACHED BY STAIRS OR BY THE DISABILITY LIFT, WHICH WE ARE NOW TO REPLACE. |  |
| 2.5  | What other activities/services are offered at this site?  |  |
|  | GE NUMBER OF GROUPS AND LOCAL RESIDENTS REGULARLY HIRE OUR AIRS FUNCTION ROOM FOR THEIR MEETINGS AND PARTIES  |  |
| 2.6  | Can any additional activities/services be offered on completion of the project which will benefit the local community?  |  |
| FUNC.  | AS WE WOULD BE BETTER PLACED TO GUARANTEE ACCESS TO OUR TION ROOM UPSTAIRS AND SO OFFER A MORE SECURE AND SAFER SERVICE TO INCREASE THE NUMBER OF VISITORS.   |  |
| 2.7  | How many people use the current facilities?   |  |
| 350 E  | ACH WEEK PLUS AROUND 150 UTILISING THE CLUB ON CRICKET ACTIVITIES.  |  |
| 2.8<br>Woul  | How many people will use the facilities on completion of the project? OUR AIM D BE 500 PLUS THE CRICKET MEMBERSHIP  |  |
| 2.9  | Over what period will the community benefit from the completion of the project?   |  |
|  | up to 12 months 1 to 2 years 2 to 3 years veer 3 years  |  |
| 2.10   | Is it necessary to be a member of your organisation to participate in its activities?   |  |
|  | NO  |  |
| 2.11   | Does your organisation charge a membership fee and if so, how much is the charge?   |  |

CRICKETING MEMBERSHIP VARIES FROM JUNIORS, TO SENIORS AND SOCIAL ONLY MEMBERSHIPS.
GROUPS WISHING TO HIRE OUR FACILITY ARE CHARGE A RENATL FEE DEPENDING ON THE FREQUENCY AND LENGTH OF HIRE.

- 2.12 When was the membership fee last increased? FEES ARE REVIEWED ANNUALLY: JANUARY 2016
- 2.13 Which parts of the local area do your members tend to come from?

## THE WIDER AREAS OF SURREY HEATH

2.14 Does your organisation have open days to encourage new members?

YES

- 2.15 How many people regularly use your facility? APPROX. 500 EACH WEEK
- 2.16 Are numbers increasing at your facility? If not, please set out why you think this might be the case.

YES

2.17 Please state how your application recognises the diverse needs of your existing and possible future members

AS AN ALL INCLUSIVE ORGANISATION WE HAVE ADOPTED AN EQUALITY POLICY THAT ENCOURAGES THE WIDEST POSSIBLE MEMBERSHIP AND AVAILABILITY TO ALL MEMBERS OF THE COMMUNITY.

THE NEED TO REPLACE OUR FAILING DISABLED LIFT RECOGNISES THE NEED TO ACCOMODATE OUR REGULAR PATRONS WITH MOBILITY DIFFICULTIES IN USING THE STAIRS.

## 3. PROJECT SITE

- 3.1 What is the location of the project? UPPER VERRAN ROAD : GU15 2JL
- 3.2 What is the tenure of the property? (If leased, please give details. If monies are to be repaid, please give details.)

OWNED BY THE CLUB

3.3 What is the current condition of the property and are any other works being carried out?

GENERALLY VERY GOOD BUT WITH A FACILITY OF THIS AGE WE ARE CONSTANTLY NEEDING TO MAINTAIN AND REPAIR AREAS.

CURRENTLY NO OTHER WORKS ARE BEING CARRIED OUT.

| 3.4   | Permission may be required under building regulations and relevant planning acts. Please give details of the authorisation obtained.  |
|-------|---|
|       | NOT REQUIRED  |
| Note: | Where permission is required and has not been obtained, the application will not progress.  |
|       | Approval of the grant does not signify approval under any other council requirements such as planning permission.   |
| 3.5   | Have you obtained, and enclosed with your application, two quotes for the work to be carried out?   |
| ). (. | YES "   |
| 3.6   | If required, have you obtained architect's plans or sketches and details of planning or building regulation consent? Have you enclosed these with your application?                 |
|       | NO  |
| 4.    | PROJECT COSTS   |
| 4.1   | How much grant are you applying for? £12,750  |
| 4.2   | What do you anticipate the total project cost to be? £25,508  |
|       | <u>COST</u> <u>ITEM</u>   |
| 4.3   | Please give a breakdown of costs (purchase of land/buildings, professional fees, VAT etc).  |
|       | £4,251 VAT  |
|       |   |
| 1.4   | Is your organisation contributing any of its own finances to the project? (If not, please explain why.)<br>YES  |
| 1.5   | Have you applied for funding from any other source? Please supply evidence of the application, whether successful or not, and, if successful please advise how much you received NO |
| 1.6   | What additional fund-raising have you undertaken? NONE AS YET   |

4.5

| 4.7            | Do your present funds contain any provision for future commitments? NO   |
|----------------|--|
| 4.8            | Please provide details of any other regular revenue or capital payments to your organisation?  |
|                | REVENUE IS DERIVED FROM MEMBERSHIP SUBSCRIPTIONS AND THE HIRING OUT OF OUR FACILITY TO LOCAL SHBC RESIDENTS  |
| 4.9            | How much additional income will be generated on completion of the project?   |
|                | ESTIMATED £5,000 p.a.  |
| 4.10           | Does your organisation have money set aside for the future sustainability of the project or maintenance of any equipment? Please explain how these areas will be catered for.  |
|                | ONGOING MAINTENACE WILL BE FUNDED FROM THE CLUB'S BUDGET.  |
| 5.             | RISK   |
| 5.1            | If your application is unsuccessful how will your organisation fund the project?   |
|                | UNSURE BUT THE LIKELIHOOD IS THAT WE WOULD HAVE TO RESTRICT ACCESS TO OUR UPSTAIRS FACILITY IN MEDIUM TERM.  |
| 5.2            | What is the risk to your organisation if the project doesn't happen?   |
|                | LOSS OF INCOME FROM COMMUNITY GROUPS WITH NUMBERS OF MEMBERS WITH MOBILITY ISSUES.   |
| 5.3            | How will you mitigate/reduce the risk?   |
|                | INCREASED USAGE BY OTHERS  |
| 5.4<br>50<br>W | The Council will fund <u>up to</u> 75% of the cost of applications up to £2,000 and <u>up to</u> 0% between £2,001-£25,000. If your project is not awarded the amount requested how ill your organisation fund the rest of its cost? |
|                | FROM INTERNAL FUNDS / REFUNDRAISING ACTIVITIES BUT EXPERIENCE TELLS US THAT THE LATTER COULD TAKE A NUMBER OF YEARS TO ACHIEVE.  |
| 6.             | OTHER RELEVANT INFORMATION   |
| 6.1            | What age groups will you cater for? >5 10 3-16 17-25   |
|                | ALL AGE GROUPS   |
| 6.2            | Provision for use by which gender? Female Male   |

2.44

|  | BOTH   |   |          |                                     |
|--|--------|---|----------|-------------------------------------|
|  | 6.3    | Does your organisation serve specific group                             | os?      | Ethnic minority groups              |
|  | WE AF  | RE PROUD TO SAY THAT WE   |          | Religious groups                    |
| ı  | SERVE  | E ALL GROUPS BUT NONE<br>FICALLY  |          |                                     |
|  |        |   |          | Disabled groups                     |
|  |        |   |          | Unemployed groups                   |
|  | 1.     | i   |          | Single parent family groups         |
|  |        |   |          | Other (please specify)              |
|  |        |   |          |                                     |
|  | 6.4    | How will the community benefit from the co                              | mpletio  | n of the project?                   |
|  |        | A SAFER AND SECURE ACCESS TO A M  | IUCH U   | SED FACILITY                        |
|  |        |   |          |                                     |
|  | 6.5    | How will you measure the success of the pr                              | roject?  |                                     |
| INCREASED USAGE AND A REDUCTION IN THE NUMBER OF REPORTE PROBLEMS ACCESSING THE UPSTAIRS ROOM. |        |   |          |                                     |
|  | 6.0    |   |          |                                     |
|  | 6.6    | How did you become aware of this fund? V                                | VEDOII   |                                     |
|  |        |   |          |                                     |
|  |        |   |          |                                     |
|  | DOCU   | IMENTS ENCLOSED WITH THE APPLICAT                                       | TION     |                                     |
|  | Please | e send <u>copies</u> of these documents with your                       | applica  | tion (please tick).                 |
|  | V      | A copy of your organisation's constitution                              |          |                                     |
|  | W      | Copies of your organisations audited accou                              | ınts for | the last two years                  |
|  | W      | Copies of statements of current or investme (as at date of application) | ent acco | ount balances                       |
|  | V      | Copies of two written estimates for the purbe undertaken                | chase (  | or hire of any equipment or work to |
|  | N/A    | Evidence you have applied to other sources                              | s of fun | ding                                |
|  |        | Also, if applicable:  |          |                                     |

-OTH

|        |    | 1    | Proof of tenure of the property  |
|--------|----|------|--|
|        |    |      | Copies of building regulations or planning permission  |
|        |    |      | Any architects plans or sketches   |
|        | N/ | N.B. | Failure to provide this information will immediately disqualify the application.   |
|        |    | 7.   | DECLARATION  |
|        |    |      | I certify that the information provided on this form is correct to the best of my knowledge. I agree that if the Council award a Community Fund grant to my organisation, I will comply with the grant conditions attached to the payment. |
|        |    | 1.   | Signed: Position: CHARMAN  |
|        |    |      | Print Name: KEITH UALSEY Date: 06-06-16  |
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