



LOTTERY FUNDED



Dorset
Area of Outstanding
Natural Beauty

Dorset AONB: Stepping into Nature Community Pot Application Form

For Office Use	Date received:	Ref No:
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Section A – Applicant Details

Name of your organisation/group/business:		
Project Title:		
Grant Request:		
Main contact:		
Position held:		
Contact address:		
Postcode:		
Telephone number:		
E-Mail address:		
Alternative contact details:		
How would you describe your organisation? (please tick)		
Registered charity	<input type="checkbox"/>	Registration no:
Company limited by guarantee	<input type="checkbox"/>	Registration no:
Company limited by shares	<input type="checkbox"/>	Registration no:
Community interest company	<input type="checkbox"/>	Registration no:
Unincorporated club or association	<input type="checkbox"/>	
Public sector	<input type="checkbox"/>	
Other (please specify)	<input type="checkbox"/>	
Is your project based within the Dorset AONB?		
Is your organisation based within the Dorset AONB?		

Section B – Project Details

Entry fields will expand to fit text as required, however we do not expect the final form to exceed 7 pages in total

1. Project location and coverage:	
If the project is outside the AONB, how will the AONB & SiN benefit	
2. Proposed start date:	
3. Proposed end date:	
4. Please provide a summary of your project (describe the project as a whole, this should cover all items/activities listed in Section c)	
5. Will the SiN grant be for :	
a) The project as a whole <input type="checkbox"/> or for a specific part of the project <input type="checkbox"/>	
b) Please explain what the SiN grant money will be used for	

6. Why the project is needed, and what level of community support does your project have (including evidence)?
7. Who will benefit from the project?
8. How will your project continue after the funding has finished?
9. Which Stepping into Nature objectives does your project link with & does it link with any other projects and or strategies? If so please give details
10. Do you have any partners in your project? If so please explain their role
11. Have you obtained all the permissions you need to carry out your project? If not when do you expect to have those agreed?

Section C – Financial Details

Project Costs			
List all items of expenditure	In Kind	Cash	Total
Total A			

Other Income			
List all other sources of income	In Kind	Cash *	Total
SiN request			
Total B			

Total A = Total B

*** 1 = Application in process 2 =Awaiting confirmation (please put decision date) 3= Confirmed**

4. AUTHORISED SIGNATORY This section must be signed by someone with the required authority (e.g. Chairperson). An electronic signature is acceptable. I confirm that, to the best of my knowledge and belief, all the information in this application is true and correct. I understand that, I maybe asked for additional information. In the event that the project is unsuitable, I agree to these details being passed to an appropriate body for further assistance.			
Signed		Print name	
Position		Date	

Please complete and return to the Stepping into Nature Project Officer, preferably by email
Julie.hammon@dorsetcc.gov.uk

Or post to Dorset AONB Partnership, c/o Environment, Colliton Park, Dorchester, Dorset DT1 1XJ

You will be informed of the decision within one month of receipt.