**NORTHUMBERLAND COUNTY COUNCIL COMMUNITY HOUSING FUND**

**COMMUNITY DEVELOPMENT/SET –UP**

|  |  |  |
| --- | --- | --- |
| **Stage 1**  **Application for Community Development/Set Up Funds** | | |
| 1. **Name of Existing/Proposed Organisation** | | |
|  | | |
| 1. **Contact Details** | | |
| **Contact Name:** | | **Contact email:** |
| **Contact Address:** | | **Contact tel no(s):** |
| 1. **Organisation Details** | | |
| **Type of existing/proposed organisation:** | | |
| 1. **Scheme Details** | | |
| Please provide a brief overview of the specific scheme(s) that you require community development/start up funding for. | | |
| 1. **Funding requirements** | | |
| Please set out the funding you need to progress this scheme to Stage 2 (Feasibility stage) | | |
| **Type of funding** | **Estimated Cost** | **Details** (including name of service provider/consultant/contractor if known) |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
| 1. **Certification**   I certify that this funding required is directly associated with the development of a community led housing scheme(s) and that the information contained within this application form is, to the best of my knowledge, accurate and reliable. | | |
| **Signature**  On behalf of | | **Date** |
| If the certification has not been completed by a recognised signatory of the proposed community housing organisation then please indicate the organisation that person represents | | |

**NORTHUMBERLAND COUNTY COUNCIL COMMUNITY HOUSING FUND**

**FEASIBILITY STAGE**

|  |  |  |  |
| --- | --- | --- | --- |
| **Stage 2**  **Application for Feasibility Fund** | | | |
| 1. **Name of Organisation** | | | |
|  | | | |
| 1. **Contact Details** | | | |
| **Contact Name:** | | | **Contact email:** |
| **Contact Address:** | | | **Contact tel no(s):** |
| 1. **Organisation Details** | | | |
| **Type of Organisation:**  **Date of Incorporation:**  (please provide a copy of your constitution or other documentary evidence of your governance arrangements)  *Please note that your organisation must normally have a minimum of 5 members (from different addresses in your community) and have either an open membership policy (or one which has restrictions that help to fulfil its overall aims and objectives)* | | | |
| **Please provide a brief summary of the organisation’s aims and objectives:** | | | |
| **Please provide details of your bank account:**  Name of Bank  Account Name  Sort Code  Account Number  Names of authorised signatories | | | |
| 1. **Partner Details** | | | |
| If applicable please state the nature of any partnerships with other community based or housing organisations. | | | |
| 1. **Scheme Details** | | | |
| **Number of Anticipated Units** |  | | |
| **Type of Anticipated Units** |  | | |
| Please provide a brief overview of the specific scheme(s) that you require feasibility funding for. Please confirm and provide documentary evidence of housing needs. | | | |
| **Are you aware of any restrictions on the use of the proposed site (eg covenants; disputes over ownership; contamination; environmental protection issues)**  **YES/NO**  If yes, please provide details: | | | |
| 1. **Risks** | | | |
| **What do you consider to be the main risks to the successful development of the scheme?** | | | |
| 1. **Community Engagement** | | | |
| **Please provide details of all community engagement completed and planned. Please provide evidence of community support for the scheme.** | | | |
| 1. **Funding requirements** | | | |
| Please set out the funding you need to progress this scheme to Stage 3 (Development Fund stage) | | | |
| **Type of funding** | | **Estimated Cost** | **Details (including name of service provider/consultant/contractor if known)** |
|  | |  |  |
|  | |  |  |
|  | |  |  |
|  | |  |  |
| 1. **Committed Funding** | | | |
| Please set out funding already claimed (from any source) | | | |
| **Type of funding and source** | | **Actual/Estimateof costs** | **Details (including name of service provider/consultant/contractor if known)** |
|  | |  |  |
|  | |  |  |
|  | |  |  |
|  | |  |  |
|  | |  |  |
| 1. **Timetable** | | | |
| **Please provide indicative dates for the following development stages:** | | | |
| **Development Stage** | | **Likely date to be achieved** | **Other Information** |
| **Completion of Feasibility Study** | |  |  |
| **Application for stage 3** | |  |  |
| **Planning Application** | |  |  |
| **Site Acquisition** | |  |  |
| **Start on Site** | |  |  |
| **Completion** | |  |  |
| 1. **Certification**   I certify that this funding required is directly associated with the development of community led housing scheme(s) and that the information contained within this application form is, to the best of my knowledge, accurate and reliable. | | | |
| **Signature**  **On behalf of** | | | **Date** |