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|  | **HAMPSHIRE AND THE ISLANDS****HISTORIC CHURCHES TRUST**Registered Charity No: 1181370**GRANT APPLICATION FORM** |

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|  | **BEFORE COMPLETING THIS FORM****please read the accompanying document****‘Conditions and Notes****for Grant Applications’** | **Application No:**(office use only) |  |
|  | **Application received:**(office use only) |  |
|  | **Name & Address of Church or Chapel** | **Listed Building Grade** (e.g. I, II or II\*)**:**………**Denomination:**…..**Diocese, if applicable:**…..**DAC Approval or equivalent received for this application?** **Yes** **[ ]**  **/ No** **[ ]** **If 'No' please explain:**… |
|  | **Applicant’s Name & Address** | **Position Held:****Telephone (home):**...**Telephone (work):**…**Mobile:**…**Email:**…  |
|  | **Architect or Surveyor’s Name & Address**(who will be overseeing proposed works) | **Telephone:**…**Email:**… |
|  | **Contractor’s Name & Address**: | **Telephone:**…**Email:**… |
|  | **Conservator (if applicable)**: | **Telephone:**…**Email:**… |
| **BRIEF HISTORY OF CHURCH OR CHAPEL** |
|  |
| What is the average number of adults (16+) attending a main weekly service or equivalent? |  |
| How many people are served by the building? (approx local parish/population size) |  |
| How many services are held per month, on average? |  |
| **REPAIRS AND OTHER WORK COMPLETED IN THE LAST 5 YEARS / AND ONGOING WORK** |
|  |
| **IS OTHER WORK PROPOSED IN THE NEXT 5 YEARS ?** **YES / NO**If YES please give details |
|  |
| **GRANTS ALREADY APPLIED FOR UNDER THIS CURRENT APPLICATION:** | **GRANTS OFFERED:**(Amount and Date offered) |
| English Heritage Joint Scheme | £ | £ | Date: |
| County Council | £ | £ | Date: |
| Local Authority | £ | £ | Date: |
| Other Grants (*please specify*): | £ | £ | Date: |
| Other Funds Available | £ | £ | Date: |
|  |  |  |  |
| **TOTAL** | £ | £ |  |
|  **WHAT WORKS ARE YOU APPLYING FOR UNDER THIS GRANT ?**Please describe fully the works under consideration. |
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| **COSTING OF PROPOSED GRANT WORKS:** |
|  |  | Estimated cost of works | £ |  |  |
|  |  | Contingencies | £ |  |  |
|  |  | Fees | £ |  |  |
|  |  | VAT @...........% | £ |  |  |
|  |  | **TOTAL** | **£** |  |  |
|  |  |
|  | HIHCT gratefully acknowledges the generous support of **Hampshire County Council**. |
|  |
| **Does your church raise money for the HIHCT Annual Ride & Stride fundraiser? YES****[ ]  / NO****[ ]** If ‘YES’ how much did your church raise last year? £\_\_\_\_\_\_\_\_\_\_\_\_\_ |
|  |
| **Is your church a member of HIHCT? YES****[ ]  / NO****[ ]** If YES please provide membership number (if known) \_\_\_\_\_\_\_\_\_\_\_\_\_\_*Please see the Trust’s Terms and Conditions, specifically item 4* |
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| **Please see the HIHCT website for further details of grant applications and Trust membership –** [**www.hihct.org.uk**](http://www.hihct.org.uk/) |
|  |

**ACTION**

**A list of items which MUST be submitted with this Application is given on the next page**

[ ]  Please tick this box to permit the Trust to use any photographs, whether paper, electronic or on a CD/DVD, on our website, in our Annual Report or at our AGM presentation.

[ ]  Please tick this box to confirm you have read and accept the Trust’s Terms and Conditions.

Signature: Date

**HIHCT GRANT APPLICATION**

**CHECKLIST**

The following documents must be submitted with your grant application if it is to be considered by the Committee.

**PLEASE NOTE:**

1. Documents may be submitted electronically as email attachments.
2. Hard copy documents may be submitted but are not required if already submitted electronically and receipt confirmed. **Hard copies of items submitted are non-returnable**.

⁪[ ]  GRANT APPLICATION FORM – completed and signed (if submitting a completed Word document, the signature page should be submitted as a PDF or posted).

[ ]  CURRENT QUINQUENNIAL INSPECTION REPORT or Full Condition Survey of the building

[ ]  INCOME & EXPENDITURE SUMMARY and BALANCE SHEET from last audited accounts

[ ]  PRICED SPECIFICATION from the architect or builder

[ ]  PHOTOGRAPHS OF THE CHURCH OR CHAPEL – 2 or more; one showing the interior and one showing the exterior in its entirety. Additional photographs showing areas where work is required would be helpful.

⁪[ ]  INTERIOR LAYOUT PLAN

[ ]  SITE PLAN

[ ]  DRAWINGS OF PROPOSED WORKS (if available. If not available, please explain)

[ ]  THIS CHECKLIST – to assist HIHCT when cross-checking documents received.

Please submit the above items to:

**Lady Walker (Rosemary)**

**Hon Secretary (Grants) HIHCT**

**45 Nuns Road**

**Winchester**

**SO23 7EF**

Telephone: 01962 622274 Email: grants@hihct.org.uk