

CRYSTAL RIG II WIND FARM COMMUNITY BENEFIT FUND



Garvald & Morham Application Form

Please complete all pages of this form.

Title of Application:

Date of Application:

Amount Applied For:

Applicant contact details:

<i>Title:</i>	
<i>First Name:</i>	
<i>Surname:</i>	
<i>Address:</i>	
<i>Telephone Number:</i>	
<i>Email address:</i>	
If you are applying on behalf of an organisation, please provide the organisation's title and charity registration number (if applicable):	

GDPR: Please note that if your application is successful, the information you provide above will be kept securely by Garvald & Morham Community Council for up to 7 years, for accounting purposes. Your personal data will not be passed onto any third parties. A record of unsuccessful applications will be kept for up to two years.

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GDPR: Please note that this section of the form will be shared with the administrators of the Crystal Rig Fund (Fred. Olsen Renewables) who may retain this data for the duration of the windfarm fund and a minimum of 7 years after.

Title of Application:

Date of Application:

Amount Applied For:

Applicant's Full Name:

What is your project proposal?

Where will this project take place?

What is your estimate of the costs involved in your project?

Please include quotes/estimates from relevant tradespersons where available

What is the expected timescale of the project?

Start Date:

Completion Date:

Would any award be used as match-funding for grants from another source?

Is there any other information that you would like to give (please use additional pages if necessary)?

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DECLARATION

I confirm that the information in this application is accurate to the best of my knowledge and belief.

If this application is successful, I understand that the applicant will be bound to use the grant for the purposes specified in the application.

I give full consent for my personal data to be used to process this application in accordance with Garvald & Morham Community Council's privacy policy, which is available to read on www.garvald.org.uk.

If this grant is for funding for a child I give consent (as parent/guardian) for you to use the personal information I have provided, in order to process this grant application.

Name (in Block Capitals): Signature

Date:

Please make a copy of this form for your own records and then return to:

Mr Phillip White (Vice Chair)

Garvald & Morham Community Council

Old School

Garvald

East Lothian

EH41 4LN Tel: 01620 830316

e-mail: philliprwhite@btinternet.com