



# APPLICATION FORM



Armagh City  
Banbridge  
& Craigavon  
Borough Council



## SHOP-FRONT IMPROVEMENT GRANT SCHEME

### APPLICATION FORM

We strongly recommend that you read the *'Guide for Applications'* prior to completing this application form in **BLOCK CAPITALS**.

#### SECTION 1: CONTACT DETAILS

##### Applicant details

NB: The applicant must be the key contact to discuss all details of this application.

Applicant Name	
Business Property Address	
Address for all correspondence	
<input type="checkbox"/> Same as above	Postcode:
Telephone	Daytime Tel: Mobile:
Email	
Relationship to Property	Owner <input type="checkbox"/> Tenant <input type="checkbox"/> Other <input type="checkbox"/> (please state)

##### Property Owner Details (if different to applicant)

Same as above

Name	
Address	
	Postcode:
Telephone	Business: Mobile:
Email	

## SECTION 2: PROJECT DETAILS

Please give details of the project works you propose to deliver. If the property is within a conservation area material specifications and paint colours must be approved by the Appointed Quantity Surveyor for Armagh City, Banbridge & Craigavon Borough Council (hereafter referred to as 'Council').

### PROJECT DETAILS:

**\*A photograph of your property must be attached to this application.**

NB: This photograph is the image that the scoring panel will use to assess the impact / need for your project unless they decide a physical site visit is necessary.

Attach any other information which you think enhances the quality of your project e.g. drawings / images / elevations / material specifications / paint colours etc.

## SECTION 3: STATUTORY CONSENT

Is Planning Permission required for your project?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Planning Application Number:		
Is Building Control consent required for your project?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Building Control Application Number:		
Is any other Statutory Consent required?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
If yes, please give details:		
Is this building in a conservation area?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
Is this building listed?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

## SECTION 4: PROJECT COSTS

ESTIMATED TOTAL PROJECT COST	SHOP FRONT SCHEME GRANT FUNDING SOUGHT	OWNER / TENANT CONTRIBUTION

**\*Written quotations for all labour & materials must be attached to this application, preferably on business letterhead or at least including supplier name & contact details**

VAT Registered?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
VAT Registration Number:		

## SECTION 5: PROJECT TIMESCALE

<b>ANTICIPATED PROJECT DURATION</b>	<b>Nr of weeks</b>
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**NB:** Work should not commence until a **'Letter of Offer'** for funding is received and you have signed and returned the **'Form of Acceptance'** in compliance with the terms and conditions of this grant.

## SECTION 6: DECLARATION

I / we confirm that the information contained in this application is **true and accurate** to the best of my knowledge and belief. I understand that Council may ask for additional information at any stage of the application process.

I / we give permission to Council **to give copies of this information** to individuals and organisations they consult with when assessing applications, monitoring grants and evaluating funding programmes.

I / we the owner/s of the property named in this application apply for grant funding towards the cost of the works described in section 2. I hereby agree to comply with the conditions of the Shop-front Improvement Grant Scheme as set out in the guidance notes which I have read and understood.

	<b>APPLICANT</b>	<b>OWNER/S</b>
<b>FULL NAME/S</b>		
<b>*SIGNATURE</b>		
<b>DATE</b>		

*\*We cannot accept any application without relevant signature/s*

## SECTION 7: CHECKLIST

Please ensure all of the below information is included with your application:

Fully completed application form	<input type="checkbox"/>
Photograph/s of property	<input type="checkbox"/>
Quotation/s for all materials & labour relating to this project	<input type="checkbox"/>
Material specification and paint colours in Section 2 (if project is within a conservation area or a listed building)	<input type="checkbox"/>

\*Make a copy of this application and any supporting documentation for you own records as we do not intend to return any information supplied unless specifically requested.

# Shop-Front

## Improvement Grant Scheme



### A COMPLETE APPLICATION SHOULD INCLUDE:

- 1: Fully completed and signed application form
- 2: Written quotation(s) from your chosen contractor / painter / workman.
- 3: A photograph or photographs of the property referred to in this application

**NB: Incomplete applications will not be assessed**, so it is in your best interest to ensure you provide all of the above information to assist us in assessing your application.

### RETURN COMPLETE APPLICATION/S TO:

[shopfront@armaghbanbridgecraigavon.gov.uk](mailto:shopfront@armaghbanbridgecraigavon.gov.uk)

### OR:

Armagh City, Banbridge & Craigavon Borough Council  
REGENERATION DEPARTMENT  
The Palace Demesne  
Armagh  
BT60 4EL

### CRITICAL DATES 2018:

This is a rolling grant scheme, however the assessment panel will meet to score complete applications quarterly, as per the below dates:

**12<sup>th</sup> June 2018**

**12<sup>th</sup> September 2018**

**12<sup>th</sup> December 2018**

NB: If your application is received after the panel has met for that quarter it will not be scored until the next scheduled meeting date.