

COLIN GRANT CHARITABLE TRUST
Registered Charity Number – SC032613

INFORMATION SHEET FOR POTENTIAL APPLICANTS

Colin Grant, late of Auchmithie, Arbroath, died on 10 August 2001 leaving the residue of his estate to be held in a Charitable Trust with the income of the same to be made over to Charitable Institutions as chosen by his Trustees.

There are now Trustees in place who meet twice yearly in March and September to consider Applications and make awards to worthy recognised Charities.

The annual distribution is made over to voluntary groups based, or supporting works in Angus and, in particular, Arbroath.

The Trustees are particularly keen to support (a) projects which improve the quality of life of the residents of Angus (and in particular Arbroath and District). (b) organisations involved in community activities (c) groups assisting the disadvantaged and those isolated by mainstream society (d) groups assisting the elderly and the sick (e) activities promoting good citizenship in the young and (f) projects promoting sport and artistic development.

The Trustees also need to be satisfied as to the suitability and strengths of the Applicant organisations, having particular regard to the enthusiasm, vision, efficiency and resourcefulness of the Applicant organisation.

The Trustees will not normally give grants in the following circumstances:

1. To any organisations which are not recognised as a Charity by the Inland Revenue.
2. To individuals, including students.
3. Sponsorship or marketing appeals.
4. Activities which collect funds for subsequent re-distribution to others.
5. Expeditions or overseas travel.

Any further information and Application Forms can be obtained from Stephanie Hayes, Thorntons Law LLP, James Thomson House, 8 Riverside Esplanade, Dundee, DD1 4BJ, Secretary to the Trustees, Tel: 01382 229111 DD: 01382 214912, Email: shayes@thorntons-law.co.uk

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Administered by Thorntons Law LLP

Thorntons Law LLP, James Thomson House, 8
Riverside Esplanade, Dundee, DD1 4BJ
(Stephanie Hayes, Secretary to the Trustees)
Tel: 01382 229111
DD: 01382 214912
Email: shayes@thorntons-law.co.uk

APPLICATION FORM
PLEASE COMPLETE IN BLACK INK/TYPE

1. GENERAL DETAILS

1. FULL NAME OF APPLYING ORGANISATION:

REGISTERED CHARITY NUMBER.....

DATE ESTABLISHED AS A CHARITY.....

2. GENERAL AIMS OF THE ORGANISATION:

3. BENEFICIARIES OF THE ORGANISATION:

WHO WILL BENEFIT FROM THE MONEY RAISED BY THIS GRANT AND HOW?

4. YOUR ORGANISATION:

HOW MANY PAID STAFF ARE EMPLOYED BY YOUR ORGANISATION?

HOW MANY VOLUNTARY WORKERS ASSIST YOUR ORGANISATION ON A REGULAR BASIS?
.....

2. FUNDING REQUIREMENT

1. PLEASE DETAIL THE ACTIVITIES FOR WHICH FUNDING IS REQUIRED AND THE BENEFIT IT WOULD BRING TO THE PEOPLE OF ARBROATH & DISTRICT:

2. IS THERE ANY PART OF THE SUM IN 1. ABOVE ALREADY RAISED? IF SO, LIST MAIN SOURCES:

SOURCE/DETAILS

AMOUNT

TOTAL AMOUNT RAISED TO DATE:

£.....

3. WHAT ELSE ARE YOU DOING TO RAISE THE MONEY REQUIRED?:

4. PLEASE DETAIL THE FINANCIAL ACTIVITIES AND RESOURCES OF YOUR ORGANISATION (a copy of the last audited Accounts should be submitted with your Application Form):

5. Unless otherwise advised, it is assumed that recipients come under the jurisdiction of the UK Tax system. By signing the application form you are certifying that to the Trustees. If you are tax resident in another jurisdiction, please advise us of which country and please detail your tax reference number there below. When such information is given, the Trust has a legal duty to report any payment to the relevant Tax Authorities in certain overseas jurisdictions.

Tax Jurisdiction _____

Tax Reference Number _____

6. PLEASE STATE THE AMOUNT OF GRANT YOU WOULD LIKE THE TRUSTEES TO GIVE:

£ _____

CLAIMANT DETAILS

NAME:.....

POST HELD:.....

REGISTERED ADDRESS:.....

.....

POSTCODE:.....

TEL NO (DAY)

TEL NO (EVE)

EMAIL

BANK ACCOUNT NAME

SORT CODE ACCOUNT NUMBER

STATEMENT: TO THE BEST OF MY KNOWLEDGE THE INFORMATION GIVEN ON THIS FORM GIVES A TRUE AND ACCURATE ACCOUNT OF THIS ORGANISATION'S WORK AND NEEDS. I CONFIRM THAT I AM AUTHORISED TO COMMIT MY ORGANISATION IN THIS WAY.

SIGNED: DATE:

IN ORDER TO AVOID THE RETURN OF YOUR APPLICATION FORM, PLEASE ENSURE THAT YOU HAVE INCLUDED THE FOLLOWING ITEM:

LATEST AUDITED ACCOUNTS