**UK Shared Prosperity Fund**

**Community Support Grant -**

**Community Venues & Spaces 2025-2026**

Application Form

Applications will be assessed subject to completion of full application form and supporting documentation.

|  |  |
| --- | --- |
| **Section 1 – About your organisation** | |
| Organisation name |  |
| Type of organisation | Charitable Incorporated Organisation  Community Interest Company  Charitable Incorporated Organisation  Company Limited by Guarantee  Social Enterprise  Registered charity  Public body which delivers or hosts community projects  Constituted body  Other – please specify:   |  | | --- | |  | |
| Has your organisation been in operation for more than 12 months? | Yes/No |
| Do you have Public Liability Insurance to a minimum of £5,000,000? (If yes, please include a copy of your certificate) | Yes/No |
| Does your project require permissions from the landlord or building owner?  If yes, please provide the written permissions from the landlord | Yes / No |
| Do you lease the building from Nottingham City Council? | Yes / No |
| If yes, will there be at least 3 years left on this lease after the improvements have been completed? |  |
| Is planning permission required for the proposed improvements? | Yes / No |
| If yes, when was the planning permission application submitted |  |
| If yes, when are you expecting planning permission to be granted |  |
|  | |
| Lead Contact name for this application |  |
| Position within organisation |  |
| Organisation address |  |
| Postcode |  |
| Telephone number |  |
| Email |  |
| Website (if applicable) or social media link |  |

|  |
| --- |
| **Section 2 – Your Organisation and the proposed use of the grant** |
| **Questions to be answered by all applicants** |
| **Q1 - Please provide a brief background of your Organisation and the work you undertake in the City of Nottingham** (Score weighting x2)  *Please include:*  *When and why your organisation was founded / needed*  *Demographic / client group / community your organisation supports*  *Track record of delivering community engagement events and activities*  (Max 200 words) |
|  |
| **Q2 - Please provide details of the venue or space (including address and postcode) to be improved and a description of the improvements you are proposing** (Score weighting x4  (Max 400 words) |
|  |
| **Q3 - Please describe how the proposed improvements to the venue or space will.**   * Increase the number or range of activities that can be delivered using the venue or space   and/or   * increase the number or the range of people / groups who will use the venue or space   and/or   * improve energy efficiency, reduce carbon footprint and/or increase biodiversity of the venue or space   and/or   * increase the number of local volunteering opportunities available at the venue or space   (Score weighting x4)  *The description included in this response should have a clear link to the outputs and outcomes you propose to deliver in section 3*  (Max 400 words) |
|  |
| **Q4 - Please describe how you will engage vulnerable members of your community (including those who feel excluded or isolated due to their labour market status, age, gender, ethnicity, health or sexuality) to access and utilise your improved venue or space.**  (Score weighting x3)  Please include details of how you will promote the improved venue or space and how you will engage the community to attend the additional events and activities that will be held there.  (Max 300 words) |
|  |
| **Section 3 – Which UKSPF Output and Outcomes will this project help delivery?** |
| Please complete the table below, indicating proposed number against each output or outcome |

|  |  |  |
| --- | --- | --- |
| **Output\*** | **Measurement** | **Proposed no. delivered by project** |
| Number of amenities/facilities created or improved | Number of amenities or facilities |  |
| Number of low or zero carbon energy infrastructure installed | Number of Units |  |
| Amount of green or blue space created or improved | Square metres (m2) |  |
| Number of volunteering opportunities supported | Number of opportunities |  |
| **Outcomes\*** | **Measurement** | **Proposed no. delivered by project** |
| Increased users of facilities/amenities | Number of users |  |
| Jobs safeguarded as a result of support | Number of full time equivalent (FTE) |  |
| Jobs created as a result of support | Number of Full time equivalent (FTE) |  |

*\* UKSPF Output and Outcome definitions can be found* [*here*](https://assets.publishing.service.gov.uk/media/67bdd6c844ceb49381213c62/UKSPF_Indicators_25-26_.xlsx)*. Please read carefully before you input proposed numbers.*

|  |  |  |
| --- | --- | --- |
| **Section 4 – Proposed use of Community Support Grant** | | |
| *Please Note: in the event that your application is successful, you will be asked to submit copies of all supplier quotes, or requests for quotes, referenced in this section to Nottingham City Council.* | | |
| **Table 4.1 - Details of costs to be funded by the grant** (capital only) | | |
| **Goods / Service #1** |  | |
| **Description of goods /service to be purchased** |  | |
| **Name of chosen supplier** |  | |
| **Date of supplier quote** |  | |
| **Cost (£) excluding VAT:** | **£** | |
| **Cost (£) including VAT** | **£** | |
| Is your organisation able to reclaim VAT?  Delete as appropriate  (if yes, the grant awarded will be for the amount excluding VAT) | YES | NO |
| **Supplier Address (if applicable)** | | |
| **Address Line 1:** |  | |
| **Address Line 2:** |  | |
| **Post Code:** |  | |
| **Supplier website (if applicable)** |  | |
| **Reasons for choosing this supplier:**  For example - price, supplier expertise, track record, quality |  | |
| If costs of these goods / services are between £2,500 and £24,999, details of two additional suppliers whose quotes have been sought must be included below | | |
| **Name and address of 2nd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |
| **Name and address of 3rd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |

|  |  |  |
| --- | --- | --- |
| **Table 4.2 - Details of costs to be funded by the grant** (capital only) | | |
| **Goods / Service #2 (if applicable)** |  | |
| **Description of goods /service to be purchased** |  | |
| **Name of chosen supplier** |  | |
| **Date of supplier quote** |  | |
| **Cost (£) excluding VAT:** | **£** | |
| **Cost (£) including VAT** | **£** | |
| Is your organisation able to reclaim VAT?  Delete as appropriate  (if yes, the grant awarded will be for the amount excluding VAT) | YES | NO |
| **Supplier Address (if applicable)** | | |
| **Address Line 1:** |  | |
| **Address Line 2:** |  | |
| **Post Code:** |  | |
| **Supplier website (if applicable)** |  | |
| **Reasons for choosing this supplier:**  For example - price, supplier expertise, track record, quality |  | |
| If costs of these goods / services are between £2,500 and £24,999, details of two additional suppliers whose quotes have been sought must be included below | | |
| **Name and address of 2nd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |
| **Name and address of 3rd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |

|  |  |  |
| --- | --- | --- |
| **Table 4.3 - Details of costs to be funded by the grant** (capital only) | | |
| **Goods / Service #3 (if applicable)** |  | |
| **Description of goods /service to be purchased** |  | |
| **Name of chosen supplier** |  | |
| **Date of supplier quote** |  | |
| **Cost (£) excluding VAT:** | **£** | |
| **Cost (£) including VAT** | **£** | |
| Is your organisation able to reclaim VAT?  Delete as appropriate  (if yes, the grant awarded will be for the amount excluding VAT) | YES | NO |
| **Supplier Address (if applicable)** | | |
| **Address Line 1:** |  | |
| **Address Line 2:** |  | |
| **Post Code:** |  | |
| **Supplier website (if applicable)** |  | |
| **Reasons for choosing this supplier:**  For example - price, supplier expertise, track record, quality |  | |
| If costs of these goods / services are between £2,500 and £24,999, details of two additional suppliers whose quotes have been sought must be included below | | |
| **Name and address of 2nd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |
| **Name and address of 3rd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |

|  |  |  |
| --- | --- | --- |
| **Table 4.4 - Details of costs to be funded by the grant (capital only)** | | |
| **Goods / Service #4 (if applicable)** |  | |
| **Description of goods /service to be purchased** |  | |
| **Name of chosen supplier** |  | |
| **Date of supplier quote** |  | |
| **Cost (£) excluding VAT:** | **£** | |
| **Cost (£) including VAT** | **£** | |
| Is your organisation able to reclaim VAT?  Delete as appropriate  (if yes, the grant awarded will be for the amount excluding VAT) | YES | NO |
| **Supplier Address (if applicable)** | | |
| **Address Line 1:** |  | |
| **Address Line 2:** |  | |
| **Post Code:** |  | |
| **Supplier website (if applicable)** |  | |
| **Reasons for choosing this supplier:**  For example - price, supplier expertise, track record, quality |  | |
| **If costs of these goods / services are between £2,500 and £24,999, details of two additional suppliers whose quotes have been sought must be included below** | | |
| **Name and address of 2nd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |
| **Name and address of 3rd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |

|  |  |  |
| --- | --- | --- |
| **Table 4.5 - Details of costs to be funded by the grant** (capital only) | | |
| **Goods / Service #5 (if applicable)** |  | |
| **Description of goods /service to be purchased** |  | |
| **Name of chosen supplier** |  | |
| **Date of supplier quote** |  | |
| **Cost (£) excluding VAT:** | **£** | |
| **Cost (£) including VAT** | **£** | |
| Is your organisation able to reclaim VAT?  Delete as appropriate  (if yes, the grant awarded will be for the amount excluding VAT) | YES | NO |
| **Supplier Address (if applicable)** | | |
| **Address Line 1:** |  | |
| **Address Line 2:** |  | |
| **Post Code:** |  | |
| **Supplier website (if applicable)** |  | |
| **Reasons for choosing this supplier:**  For example - price, supplier expertise, track record, quality |  | |
| If costs of these goods / services are between £2,500 and £24,999, details of two additional suppliers whose quotes have been sought must be included below | | |
| **Name and address of 2nd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |
| **Name and address of 3rd supplier asked to provide quote** |  | |
| Date quote provided (if applicable) |  | |
| If quote was provided: Supplier quote £ (exc VAT) |  | |
| If quote was provided: Supplier quote £ (inc VAT) |  | |
| Reason for not choosing this supplier |  | |

***Please copy and paste in additional versions of Table 4.1 below this table if required. Rename 4.6, 4.7 etc***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Section 4: Summary of goods / services to be funded by the grant**  Please ensure amounts match those in tables above | | | | |
| Is your organisation able to reclaim VAT?  Delete as appropriate  (if yes, the grant awarded will be for the amount excluding VAT)\* | | YES | NO |  |
| Goods / service # | Name of Chosen Supplier | Cost (excluding VAT) | Cost (including VAT) | Amount of UKSPF Grant Requested. (use amount in green if you are able to reclaim VAT and amount in yellow if you are not able to reclaim VAT) |
| #1 (from Table 4.1) |  |  |  |  |
| #2 (from Table 4.2) |  |  |  |  |
| #3 (from Table 4.3) |  |  |  |  |
| #4 (from Table 4.4) |  |  |  |  |
| #5 (from Table 4.5) |  |  |  |  |
| #6 (from Table 4.6) |  |  |  |  |
| #7 (from Table 4.7) |  |  |  |  |
| Total  Min: £10,000  Max: £24,999 |  |  |  |  |

*Please insert additional rows into this table if additional tables have been added*

*\*Please note: If your organisation is able to reclaim VAT, you must be able to cash-flow the value of this VAT until it is reimbursed / reclaimed, as the UKSPF grant will only cover the costs of the goods and services excluding VAT.*

|  |  |
| --- | --- |
|  | |
| **Section 5 - Subsidy Control** | | |
| The new UK subsidy control regime commenced from 4 January 2023. The new regime enables public authorities, including devolved administrations and local authorities, to deliver subsidies that are tailored for local needs. Public authorities giving subsidies must comply with the UK’s international subsidy control commitments. The subsidy control legislation provides the framework for a new, UK-wide subsidy control regime. Further information about subsidy control can be found on the gov.uk website at: <https://www.gov.uk/government/collections/subsidy-control-regime> | | |
| Have you received a Subsidy or State Aid of more than £315,000 over the last 3 financial years | Yes  No | |

|  |
| --- |
| **Section 6 – Payment of grant** |
| If your organisation is requesting grant payment in advance of purchase, you will need to provide evidence of your current finances.  Nottingham City Council will accept the following evidence of your organisation’s finances:  - Bank statement (Screen shot will be accepted)  - Copy of management accounts  Please ensure your evidence is clear and shows your organisation’s current financial situation |

|  |  |  |
| --- | --- | --- |
| Would you require to be paid the grant in advance in order to be able to purchase the goods and services? \* | Yes | No |
| **If yes, please answer the remaining questions in this section**  **If no, please go to Section 7** | | |
| Please provide a detailed reason as to why you are not able to make the purchases before you receive the grant. |  | |
| Are you registered as a supplier on NCC financial system? | Yes  No | |
| Have you received any grants / payments from NCC in the past 3 years?  If yes, please give details of who oversaw the grant / payments and what the grants were for. | Yes  No | |
|  |  | |
| Are you currently receiving a grant or funding from NCC to deliver a project? (e.g. UKSPF, Community & Family learning, etc.) | Yes  No  If yes, please give details: | |
|  |  | |

|  |  |
| --- | --- |
| **Section 7 – Declarations** | |
| * I confirm that I am authorised to sign on behalf of the company and confirm that the information contained in this application form is correct to the best of my knowledge * I declare that neither myself as signatory to the application, members of the governing body of the company or agents acting on our behalf have an interest in the awarding of contacts to the suppliers who have quoted for the work. * I understand that any financial assistance granted will be repayable on demand, or future payments not made, if any information provided is found to be incorrect. I give permission for the information contained in this form to be shared, if requested, by the Programme funding body, the Ministry of Housing, Communities & Local Government (MHCLG), East Midlands County Combined Authority (EMCCA), and Nottingham City Council. * I accept that the grant is consistent with most recent UK government law regarding subsidy control and any over payment of grant will be paid back to Nottingham City Council. * I understand that if Nottingham City Council approves the application, the terms and conditions shall be enforceable on the basis of the Terms and Conditions of the grant scheme * I understand that providing wrong or misleading information is a criminal offence and any such information may be used against applicants in any subsequent criminal investigation. The information provided on the online application form may be made available to other departments/agencies for the purposes of preventing or detecting crime. * I understand that any grant received by a business must be declared to HM Revenue & Customs (HMRC) as appropriate as part of the tax return for the business. * I confirm that the information provided in this application is a true and accurate description of the intended use of the grant. | |
| **Data protection** | |
| The Community Support Grant project is funded through the UK Shared Prosperity Fund (UKSPF) administered by the Nottingham City Council.  The Community Support Grant project has contractual obligations to record outputs and outcomes associated with this funding. Further details on the collection of this information will be included in the Grant Agreement should this application be successful.  For the purposes of the General Data Protection Regulation (GDPR), in terms of the information processed, the following parties are Data Controllers:   * The Lead Authority, Nottingham City Council   See the Privacy Notice on the Nottingham City Council UKSPF webpage for more information (www.nottinghamcity.gov.uk/ukspf). | |
| **Name** |  |
| **Signature** |  |
| **Position in business** |  |
| **Date** |  |

|  |  |
| --- | --- |
| **Section 8 – Application checklist.**  **Please use this checklist to ensure that you send us everything that we need to assess your application.** | |
| You have answered all the relevant questions on this application form | Yes  No |
| You have enclosed a proof of Public Liability Insurance | Yes  No |
| You have enclosed a letter/email from your landlord giving permission for the proposed works to take place | Yes  No |
| Your lease (min 3 years) if your proposal involves a property or space owned by Nottingham City Council | Yes  No |
| You have retained copies of all of the quotes, and/ or requests for quotes, referenced in Section 4 | Yes  No |
| You have read and signed Section 7: Declarations | Yes  No |
| You have completed the Appendix sections where applicable | Yes  No |
| If you are requesting grant payment in advance of purchase of equipment, you have attached evidence of the Organisation’s finances | Yes  No |

|  |
| --- |
| **Next Steps** |
| Please email the completed form and supporting documents to:  [**ukspf@nottinghamcity.gov.uk**](mailto:ukspf@nottinghamcity.gov.uk) **by** **23:59 on Wednesday 21st May 2025.**  On receipt of a fully completed application, your application will be acknowledged as received and a decision made within 2 weeks of receiving the application. The volume of applications may affect this timescale.  Completing this application form does not guarantee the awarding of a grant. A grant agreement will be sent to you if your application is approved. |