

# COMMUNITY ENHANCEMENT PROGRAMME 2019

**NOTE: Closing Date 30<sup>th</sup> May 2019 at 5.00 pm**



An Roinn Forbartha  
Tuaithe agus Pobail  
Department of Rural and  
Community Development



## FOR OFFICE USE ONLY

Date Received:

Reference Number:

LCDC recommendation:

GROUP /ORGANISATION NAME:

**ALL APPLICATIONS ARE TO BE RETURNED BY THURSDAY 30TH MAY TO:**

Laois Local Community Development Committee  
Laois County Council  
Áras an Chontae,  
JFL Ave.,  
Portlaoise,  
Co. Laois  
R32 EHP9

Please read the CEP Application Guidelines before completing this form.

**Department of Rural and Community Development  
Community Enhancement Programme**

The Department of Rural and Community Development (“the Department”) operates a grant programme through the Local Community Development Committees (LCDCs). This capital grant programme provides funding to enhance facilities in disadvantaged communities. Applications should relate to one or more key priority areas identified in the LCDC Local Economic and Community Plan (LECP) in order to be eligible for consideration. LECP is available on <https://www.laois.ie/wp-content/uploads/Full-Adopted-LECP-Plan-1.pdf>

**TERMS AND CONDITIONS**

- Under the Community Enhancement Programme (CEP), which is funded by the Department, grants will be provided towards capital projects to enhance facilities in disadvantaged areas. The scheme does not provide funding for the employment of staff.
- The activity or project must benefit the local community and relate to the key priority areas identified in the LECP.
- The information supplied by the applicant group /organisation must be accurate and complete.
- Misinformation may lead to disqualification and/or the repayment of any grant made.
- All information provided in respect of the application for a grant will be held electronically. The Department reserves the right to publish a list of all grants awarded on its website.
- The Freedom of Information Act applies to all records held by the Department and Local Authorities.
- The application must be signed by the Chairperson, Secretary or Treasurer of the organisation making the submission.
- It is the responsibility of each organisation to ensure that it has proper procedures and policies in place including appropriate insurance where relevant.
- Applications must be on the 2019 form.
- Evidence of expenditure, receipts /invoices must be retained and provided to the LCDC or their representative if requested.
- Grant monies must be expended and drawn down from the LCDC by end of year 2019. Photographic evidence may be required to facilitate draw down of grants.
- The Department’s contribution must be publicly acknowledged in all materials associated with the purpose of the grant.
- Generally no third party or intermediary applications will be considered.
- Late applications will not be considered.
- Applications by post should use the correct value of postage stamps and allow sufficient time to ensure delivery not later than the closing date of **Thursday, 30th May 2019 at 5pm**. Claims that any application form has been lost or delayed in the post will not be considered, unless applicants have a Post Office Certificate of Posting in support of such claims.
- Breaches of the terms and conditions of the grants scheme may result in sanctions including disbarment from future grant applications.
- Please ensure the application form is completed in full. Incomplete applications will not be considered for funding.
- In order to process your application it may be necessary for Laois County Council to collect personal data from you. Such information will be processed in line with the Local Authority’s privacy statement which is available to view on [www.laois.ie](http://www.laois.ie).

All questions on this form must be answered. Please write your answers clearly in block letters.

## SECTION 1 – YOUR ORGANISATION

Name of Group / Organisation	
Address	
Eircode	
Contact name	
Role in Group/Organisation	
Telephone number	
E-mail	
Website	
Alternative Contact name	
Please only supply details of an alternate contact if you have permission to do so. Please tick the box below to confirm that you have their permission to supply their contact.	<input type="checkbox"/> Yes
Alternative Telephone number	
Alternative E-mail	

Please provide a brief organisational description of your group / organisation e.g. committee structure, meeting schedule etc.

Has your Organisation / Group registered with Laois Public Participation Network (PPN)?

Yes                       No

(If NO, then perhaps you would consider joining the PPN, Suzanne O'Connor, 057 8665661 or email at [ppn@laoiscoco.ie](mailto:ppn@laoiscoco.ie))  
Year established \_\_\_\_\_

What is the purpose of group / organisation?

**Successful applications for funding under this programme will only be paid to the applicant organisation's Bank Account. Please ensure you have your Bank Account details to hand if your application is successful.**

Have you received funding under any capital grants schemes from 2016 to current date- i.e. grants from Government Departments, Local Authority or LEADER?

Yes                       No

If YES please give details below:

Name of scheme	Funding organisation	Amount of funding

If any of the above funding was paid through the Local Authority, have you submitted your Bank Account Details previously?

Yes                       No

Do you receive funding from any other organisation?

Yes                       No

If YES please give details below:

Funding organisation	Amount received	Date received

Is your organisation affiliated or connected to any relevant local regional or national body?

Yes                       No

If YES please give details below:

Name of organisation(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

How does your organisation link in with other organisations in your area? \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Charitable Status Number (if applicable): \_\_\_\_\_

Tax Reference Number (if applicable): \_\_\_\_\_

Tax Clearance Access Number (if applicable): \_\_\_\_\_

## **SECTION 2 – Project Details**

How much funding are you applying for?  
Tick one of the below options.

- Small scale capital grant of €1,000 or less
- Capital grant in excess of €1,000

### **PURPOSE OF GRANT**

What will the funding be used for?

Note: This list is not exhaustive, but gives examples of types of capital expenditure

#### **Equipment**

- IT Equipment
- Sports Equipment
- Training Equipment
- Safety Equipment
- Defibrillator

#### **Development**

- Community Facilities
- Youth Clubs
- Improvement to Town Parks
- Energy efficient upgrade

#### **Other**

- CCTV
- Research facilities
- Signage
- Upgrade of Buildings
- Other

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What is the purpose of the grant? (Outline details of the project).

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When will your project begin? \_\_\_\_\_

When will your project be completed? \_\_\_\_\_

Are all relevant permissions in place (e.g. planning, written consent from landowner/property owner if your project involves the development of a property)?

Not applicable   Yes  No

Is this part of a phased development and/or linked with (or funded by) other schemes operated by Government Departments or the Local Authority?

Yes  No

If YES please provide the details below:

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**FUNDING**

Amount being applied for under the CEP: € \_\_\_\_\_

Is this amount a partial or total project cost?  Partial  Total

If partial, give the estimated total project cost: € \_\_\_\_\_

**Important note:**

Please include supporting documentation. If your total project cost is less than €5,000 and is not related to building/landscaping/construction works, then please include estimates/quotes from a minimum of three different independent suppliers with this form.

For all other cases, please contact [dce@laoiscoco.ie](mailto:dce@laoiscoco.ie) or 057 8664169 for information on the required supporting documentation.

To be eligible for funding under this programme you must state where you will source any shortfall of funding. Please provide these details below.

Source	Amount

Has your organisation availed of funding under the Communities Facilities Scheme or RAPID in 2017, or the 2018 Community Enhancement Programme, or the 2018 Men's Shed fund?

If YES, please give details of the project which received funded in 2017 and/or 2018:

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Please state how your group proposes to publicly acknowledge the Department, LA or LCDC

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The LCDC will check to ensure that this application works towards addressing priorities within its Local Economic and Community Plan (LECP) which you can access on [www.laois.ie](http://www.laois.ie) If your application is for an amount greater than €1,000, please complete the below table to state which key priority area(s) in the LECP this grant application relates to and the estimated number of people to benefit.

If your application is for a small scale capital grant of €1,000 or less, then you may wish to complete the below table, but you are not required to do so.

Key priority area of LECP	No. of beneficiaries

### **SECTION 3 - DECLARATION**

I declare that the information given in this form is correct.

I confirm I have read and fully understand the Terms and Conditions of the Community Enhancement Programme (see page 2 of this form) .

I confirm that I have read the Community Enhancement Programme Application Guidelines prior to completing this form .

I confirm that this grant application is submitted in acceptance of and compliance with the Terms and Conditions .

I confirm that the applicant group/organisation does not have the funding to undertake the work/project without this grant aid or alternatively that the grant will facilitate a larger project which they would otherwise be unable to afford.

I confirm that the applicant group/organisation is tax compliant.

Name in block capitals (on behalf of group / organisation):	
Signature:	
Position held in group / organisation (block capitals):	
Date:	