

## **APPLICATION FOR CIL FUNDING**

1.	Name of Organisation	
2.	Name, Address and Position of Contact in Organisation	
3.	Telephone Number of Contact	
4.	Is the Organisation a Registered Charity?  If yes, Charity Number	Yes/No
5.	Amount of CIL requested	£
6.	For what purpose or project is the grant requested?	
7.	What will be the total cost?	£
8.	When will the money be spent?	
9.	Who will benefit from the project?	
10.	Approximately how many of those who will benefit are Billingshurst parishioners?	

Please submit this form together with a covering letter giving any other information which you feel will support the application including quotations, together with recent certified accounts. In signing this form you agree to abide by any Terms & Conditions included within the policy.

Signed		Date	
Name (In ca	apitals)		