Exmouth Town Council

Grant Application Form 2026-27

Exmouth Town Council is empowered to award grants under a specific section of the Local Government Act 1972, usually known simply as “Section 137”. Section 137 enables a local council to incur expenditure which is “in the interests of and will directly benefit its area or any part of it and some or all of its inhabitants”. Section 137 has a spend restriction. The maximum amount which a council may spend under section 137 in any one year (i.e. From 1 April to the following 31 March) is currently £11.60 per elector for the 2026-27 financial year. The limit increases in line with the Retail Price Index.

Section 137 does not award the Council any additional funds. The section merely grants a limited freedom to spend part of the Council’s budgeted income or reserves on items for which no other statutory power exists. The benefit accruing must be commensurate with the expenditure incurred, which is a decision for the Council.

Please note that the **total** amount of grant funding allocated by Exmouth Town Council under Section 137 for 2026-27 is £10,000. It is therefore unlikely that individual grants above £1,500 will be approved.

Successful applicants will be encouraged to attend the Annual Town Meeting and give a short presentation to explain how the grant funding has been used.

Applications are considered by the Council’s Finance Committee, which meets quarterly in February, May, August and November and application forms should be returned to:

Lisa Bowman
Town Clerk
Exmouth Town Council
Exmouth Town Hall
1 St Andrew’s Road
Exmouth EX8 1AW

Email: townclerk@exmouth.gov.uk
Tel: 01395 276167

Help and advice about making an application is available. Please contact the Town Clerk.

FOR OFFICE USE ONLY	
Date received:	
Date of Finance Committee Meeting	
Total funding allocated	£

SECTION 1. CONTACT DETAILS

1a. Name of your organisation:

1b. Address where the project or activity is, or will be based:

Address	
	Post Code:
Website:	

2a. Main contact for this application – this is someone in a management position who knows the organisation's activities and can ideally be contacted during normal office hours.

Title		First name(s)	
		Surname	

Position held:	
Telephone:	Email:

2b. Address for correspondence (if different from the address given in 1b above):

Address	
	Post Code:

Alternative contact name and details in case main contact is unavailable:

3. Do you have any particular communication needs (such as textphone, sign language, other language)?

SECTION 2. ABOUT YOUR ORGANISATION

4. Please indicate the legal status of your organisation (tick those that apply):

Unincorporated voluntary or community group		Charitable unincorporated association	
Local branch of a national organisation (see question 5)		Charitable Incorporated Organisation (CIO)	
Charitable company limited by guarantee		Awaiting Charity registration	
Trust		Other (describe)	

Charity Registration no:		Company no:	

5. If you are a branch of or related to a larger organisation, please tell us which one.
Please indicate what your relationship is with this organisation.

6. What are your organisation's overall aims and objectives?

SECTION 3: ABOUT THE SERVICE/ACTIVITY FOR WHICH YOU REQUEST A GRANT

Exmouth Town Council is seeking to award grants to voluntary, community and similar not-for-profit organisations which provide services that improve the quality of life for Exmouth residents.

7. Name of the activity to be funded (write 'core activities' if the grant is to cover the whole of the organisation's activity rather than a specific project or activity):

8. Brief description of the activity:

9. What do you expect to achieve through use of the grant?

10. How precisely will the grant be used to achieve this?

11. What evidence is there of a relevant need for these outcomes (stated in Question 9) in Exmouth and its communities, and at what level?

12. What other provision is there in Exmouth which works towards similar outcomes?

13. How many people do you expect to benefit from your activity?

a. Adults aged 18 years or above:

Of these, how many are likely to be residents of Exmouth?

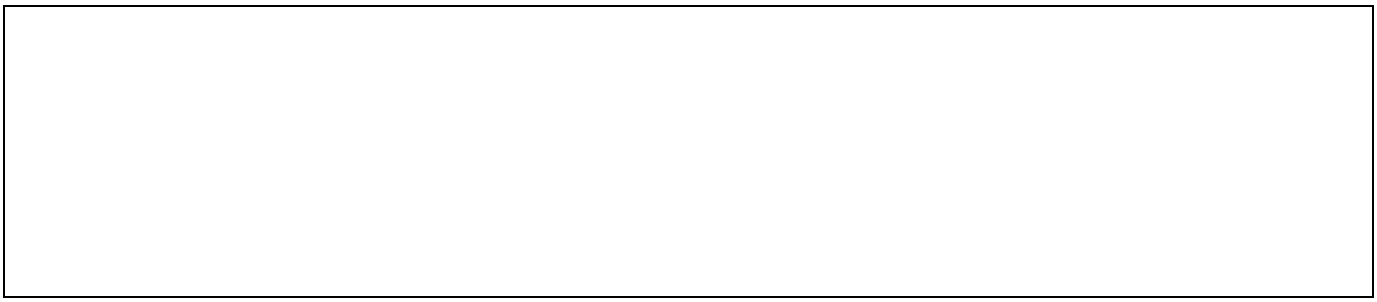
b. Children and young people aged under 18 years:

Of these, how many are likely to be residents of Exmouth?

c. Vulnerable adults:

Of these, how many are likely to be residents of Exmouth?

14. How will the success of your project be evaluated or measured?



SECTION 4. GRANT REQUESTED

15. Sum requested as a grant from Exmouth Town Council, in words and figures. Please note that the **maximum** amount of grant which will be considered is £1500

	£

16. Breakdown of the total budget of the activity for which you are seeking funding:

EXPENDITURE	
a. Employee Costs	£
b. Premises Costs, including utilities	£
c. Transport Costs	£
d. Supplies and services costs	£
e. Other Costs (specify)	£
Total Expenditure (equal to sum of above 5 lines)	**£**
INCOME	
f. Income from this grant (as in 15 above)	£
g. If the total costs of your activity are greater than the amount you are requesting from Exmouth Town Council, please tell us how you will fund the rest of the activity. Income from other grants (specify from whom, and whether secured yet) • Other local authorities (please specify which) • Central government • Health authorities • European Funds • Companies / trusts • National Lottery • Other grants – please specify from whom	£
h. Income from fees, charges etc	£
i. Income from fundraising activities	£
j. Income from other sources – please specify which	£
Total income (equal to sum of lines f, g, h, i and j above)	**£**

17. Describe how your activity is sustainable and other ways in which you will secure funding to carry it out:

18. What contribution (financial and / or in kind) if any, are you making towards this activity from your own resources?

SECTION 5. DOCUMENTS AND ACCOUNTS

19. INSURANCE – Please provide evidence of current:

- Public Liability Insurance covering a minimum of £2 million
- Employer's Liability Insurance, if you are employing staff

If your insurance cover is provided by another organisation, for example through a group scheme, you must provide their name and address

20. ACCOUNTS – You must provide a copy of your audited accounts for the latest complete financial year. If the period covered by these accounts finished before 31st March 2025, or if the accounts have not been audited, or if your organisation has recently been established and you are unable to provide audited accounts, please provide a written explanation:

21. Please provide a copy of the following financial information about your organisation's most recent accounts:

Name of Bank or Building Society:	
Account/s Name/s:	
Account/s Number/s:	
Sort Code/s:	
Address/s:	
Post Code:	Telephone:

22. Please provide the details of two unrelated signatories to the above account, who can approve withdrawals:

Signatory one (print):
Role in Organisation
Signatory two (print):
Role in Organisation:

23. What level of reserves (savings) do you hold and for what purpose?

24. **Agreement and Undertaking**:

Please read this section carefully before signing. It is your responsibility to ensure your application is properly presented.

- Please ensure you have completed every part of this application form. Omissions of vital information in your application may lead to it being rejected.

- Please ensure that all the necessary supporting information and documentation is provided with this application form. If there are missing documents by the submission deadline date it will lead to the application being refused.

- By signing this agreement you undertake:

Data Protection Act – Exmouth Town Council will use the information provided on the application form and supporting documents during assessment and for the life of any grant awarded. In addition, the information and supporting documentation will be used in the analysis of the Council's grant process and for our own research. The Council may give copies of this information to individuals and organisations we consult when assessing applications, when monitoring grants and evaluating the way the Council's funding programme works and the effect they have. The Council recognises the need to maintain the confidentiality of applicants and their details will not be made public in any way, except as required by law.

Freedom of Information Act - The Freedom of Information Act 2000 gives members of the public the right to request any information that we hold. This includes information received from third parties, such as, although not limited to, grant applicants, grant holders, contractors and people making a complaint. If information is requested under the Freedom of Information Act the Council will release it, subject to exemptions; although the Council may consult with you first. If you think that information you are providing may be exempt from release if requested, you should let us know when you apply.

25. **Declaration**:

I the undersigned agree:

i. to utilise any grant from Exmouth Town Council solely in connection with the activity described in this application form. If for any reason the grant is unused it will be repaid before the end of the twelve-month grant period
ii. to keep the appropriate officer of the Council informed of any proposed changes to the activity, the organisation's manager or changes in contact details
iii. to recognise Exmouth Council in any and all literature related to the activity.
iv. to provide the Council with information which will enable the Council to monitor achievement of the stated outcomes. I understand that, if successful in my application, my organisation will be required to provide a report for the Annual Town Meeting.

If the activity which this application relates to involves children, young people or vulnerable adults, I confirm that the appropriate CRB checks will have been obtained for all volunteers, staff and management committee members in direct contact with children, young people or vulnerable adults by the date that the funding of the project is due to commence.

The application form must be signed by the chairperson of the organisation or someone in a similar position. **This should not be the same person as the Main Contact in Section 1.**

Title:	First name(s):	Surname:

Position within the organisation:	

Home/business address:

	Postcode
Phone	Email

Declaration

The Council will take your signature on this form as confirmation that you understand the obligations under the Data Protection Act 2018 and the Freedom of Information Act 2000 and that you accept that the Council will not be liable for any loss or damage to you in fulfilment of our obligations under the relevant law.

Signature: _____ Position _____

Date: _____

Application checklist:

Please check that you have enclosed

A copy of audited accounts and annual report	
Bank statements covering the last three months	
A copy of your organisation's Constitution (if applicable)	
A copy of your organisation's Terms of Reference or Articles of Association (If applicable)	
A copy of the certificates of employer insurance (if applicable)	
A copy of the public liability insurance	
A copy of certificates building/contents insurance (if applicable)	
If your service/activity involves children, young people or vulnerable adults, you are required to verify that DBS checks will have been made by the date that the grant is due to commence by signing the above Declaration. You are also required to submit the following policies for your organisation: Child Protection Policy and Vulnerable Adult Policy.	

If you have any additional information that you would like to add to this application, please attach it to this application form.