



# Ward Flexibility Funding Application Form

Thank you for your interest in Stockport Council's Ward Flexibility Fund. To give your group the best chance of success please read the guidance notes and the questions on the application form carefully.

Please ensure that all boxes on this form are completed. You must also include all additional information that is requested.

## 1. About Your Organisation

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### 1. Name of Organisation/ Group

FRIENDS OF REDDISH VALE COUNTRY PARK

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### 2. Organisation/Individual Address

REDDISH VALE ROAD  
REDDISH  
STOCKPORT  
SK5 7HE

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### 3. Main Contact Details (for correspondence)

Title:

Name:

Role:

GROUP COMMITTEE MEMBER AND VOLUNTEER OF FRIENDS OF REDDISH VALE

Address

:

Postcode:

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- A governance/management committee
- A Constitution/governing document/set of rules
- An Equal Opportunities Policy
- A Child Protection Policy (where necessary)
- A Health and Safety Public liability

## 2. About Your Application

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### 9. Please give us a brief description of your proposed/planned project or activity

*You may wish to include details of what activities will take place, where will it happen, how often and who will take part. If you are applying for equipment you can tell us what will it be used for and why is it needed.*

ONGOING LITTER PICKING AND RUBBISH CLEARANCE IN ALL AREAS OF REDDISH VALE COUNTRY PARK (161 HECTARES). THE OUTDOOR GROUP MEET TWICE A WEEK AND WE ALSO HOLD SPECIAL EVENTS IN ASSOCIATION WITH KEEP BRITAIN TIDY. THE EQUIPMENT WILL BE LITTER PICKERS, BAG HOOPS, PRINTED HIGH VIS VESTS, EYE PROTECTION, GLOVES AND FIRST AID KIT. THE EQUIPMENT IS PROTECTIVE EQUIPMENT THAT IS REQUIRED DUE TO POTENTIAL HAZARDS , WHILST CARRYING OUT LITTER PICKINGAND TO CONFIRM TO SMBC RISK ASSESSMENT.

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### 10. Who will benefit from this grant?

*e.g. local residents, young people, older people and how?*

ALL VISITORS TO REDDISH VALE COUNTRY PARK AND RESIDENTS WHO LIVE ON THE BOUNDARIES OF THE PARK BY REMOVAL OF WASTE, RUBBISH AND LITTER WHICH IS DETRIMENTAL TO BOTH THE APPEARANCE AND THE WILDLIFE IN REDDISH VALE COUNTRY PARK.

#### 10(a) How Many Stockport residents will benefit?

ALL RESIDENTS OF REDDISH VALE ROAD, RIVER VIEW, WOODHALL CRESCENT, HILDA GROVE, WILLOW AVENUE, PENNY LANE, LANCASHIRE HILL FLATS, HOLLOW END TOWERS, HOLLOW END, BODMIN CRESCENT, BRINNINGTON RISE, BRINDALE ROAD, BLACKBERRY LANE, GRASS CROFT, MOAT WALK, LAPWING LANE, MILL LANE AND SURROUNDING ESTATES, WOODSTOCK GREEN, THE CLOUGH, CLOUGH WALK, LENHAM TOWERS, PEMBRY CLOSE, ROMNEY WAY.

#### 10(b) Are there any restrictions on who will benefit from the funding?

NO

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### 11. Your Project's Budget

*Please provide a breakdown of cost for your project including VAT where applicable and submit any estimates for the purchase of equipment or work to be done.*

#### INCLUDING VAT

LITTER PICKER X 36	£351.32
HOOPS X 36	£288.00
SAFETY GLASSES X 36	£39.00
GLOVES X 120 PAIRS	£54.00
PRINTED HI VIS VESTSX 36	£216.00
BACK PACK FIRST AID KIT	£35.00

**TOTAL £983.32**

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**11(a) How much will the project/activity cost in total?**

£983.32

**11(b) Tell us about other any other sources of income you have already applied for or raised so far in relation to this project**

**INCOME FROM THE FRIENDS OF REDDISH VALE GROUP**

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**12. How much are you applying for from the Ward Flexibility Budget?**

£500.00

**12(a) If the amount you are applying for covers only part of the project/activity, then please tell us how do you intend to fund any shortfall?**

FRIENDS OF REDDISH VALE

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**13. What is the planned timescale for spending this grant?**

Start	ASAP
Finish	ONGOING

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### 3. Which Wards are you Applying to?

You may tick more than one box. Please note that no grant of more than £1,000 in totality will ordinarily be made.

Please tell us for each ward you wish to make an application to:-

- (a) how many people will benefit in that ward; and  
 (b) what proportion of funding from your overall application you are seeking from each ward.

	Number of beneficiaries	How much funding you are seeking
<b>Bramhall &amp; Cheadle Hulme South Area Committee</b>		
Bramhall North	<input type="checkbox"/>	£
Bramhall South & Woodford	<input type="checkbox"/>	£
Cheadle Hulme South	<input type="checkbox"/>	£
<b>Central Stockport Area Committee</b>		
Brinnington & Central	<input type="checkbox"/>	
Davenport & Cale Green	<input type="checkbox"/>	£
Edgeley & Cheadle Heath	<input type="checkbox"/>	£
Manor	<input type="checkbox"/>	£
<b>Cheadle Area Committee</b>		
Cheadle & Gatley	<input type="checkbox"/>	£
Cheadle Hulme North	<input type="checkbox"/>	£
Heald Green	<input type="checkbox"/>	£
<b>Heatons &amp; Reddish Area Committee</b>		
Heatons North	<input checked="" type="checkbox"/>	£
Heatons South	<input checked="" type="checkbox"/>	£ 500. TOTAL
Reddish North	<input checked="" type="checkbox"/>	£
Reddish South	<input checked="" type="checkbox"/>	£
<b>Marple Area Committee</b>		
Marple North	<input type="checkbox"/>	£
Marple South	<input type="checkbox"/>	£
<b>Stepping Hill Area Committee</b>		
Hazel Grove	<input type="checkbox"/>	£
Offerton	<input type="checkbox"/>	£
Stepping Hill	<input type="checkbox"/>	£
<b>Werneth Area Committee</b>		
Bredbury & Woodley	<input type="checkbox"/>	£
Bredbury Green & Romiley	<input type="checkbox"/>	£
<b>Totals</b>		<b>£500.00</b>

This total should add up to the figure you provided in Question 12



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## 4. Application Checklist and Declaration

1. I am authorised to make this application on behalf of the above organisation
2. I certify that the information contained in this application is correct
3. If the information changes in any way I will inform Democratic Services accordingly.
4. I give permission for Democratic Services to contact my organisation and/or myself by phone, mail or e-mail with information about its activities and funding opportunities.
5. I/ we agree (if required) to attend an Area Committee meeting to explain how the proposal will improve the environmental, economic or social wellbeing of the area and to answer any questions.
6. Our details can be used for promotional purposes should this request be successful
7. I/We will use this grant for the proposed project/activities stated in our application.
8. I/we will not use the grant for any other purpose prior to contacting Democratic Services in order to seek authorisation.
9. I/we will provide appropriate proof of expenditure to Democratic Services, within 12 months from the Grant being made.
10. I/we will highlight the support of the Area Committee in recent publicity material.
11. I/we agree to providing information to assist in the future monitoring of the effectiveness of the funding including reporting back to the Area Committee on how the grant has been spent and what difference it has made.
12. I/we agree that the content of this completed application form and any supplementary information provided may be published on the Council's website and other publications as part of the application process.

Print your name:

Signature: .....

or if submitted electronically tick this box to signify your agreement to the above terms

Date: 04/06/2020

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