



# 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

Chester's Croft Residents Association

### 2. Organisation/Individual Address

20 Chester's Croft, Spath Lane East, Cheadle Hulme, Stockport, Cheshire SK8 7NN

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

Title: Mrs

Name: Anne Nerney

Role: Secretary

Address:

Postcode:

Home Phone Number:

Mobile Phone Number:

Email Address:

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### 4. Please provide your bank account details

Account Name:

Account Number:

Sort Code:

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Town Hall, Stockport SK1 3XE

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**5. What is the status of your Organisation/ Group?**

*Please Tick*

- |                                |                          |                                  |                          |
|--------------------------------|--------------------------|----------------------------------|--------------------------|
| A New Group                    | <input type="checkbox"/> | Voluntary Organisation           | <input type="checkbox"/> |
| A Registered Charity No.       | <input type="checkbox"/> | Company Limited by Guarantee No. | <input type="checkbox"/> |
| Applying for Charitable Status | <input type="checkbox"/> | Unregistered Association         | <input type="checkbox"/> |
| Friendly Society               | <input type="checkbox"/> | Other (Please specify)           | <input type="checkbox"/> |
| Housing Association            | <input type="checkbox"/> | Residents Association            |                          |

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**6. Please describe the main activities of your Organisation/ Group**

To act as a main point of contact in dealing with the Park Home owners, Serenity Park Homes Attend meetings, social get togethers, supporting each other in times of difficulty.

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**7. When was your Organisation/Group established?**

**February 2017**

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**8. Does your organisation have the following policies and procedures in place?**

*If you are awarded a grant you will be required to send copies of all relevant documents as part of the grant agreement.*

- |  |                                     |
|--|-------------------------------------|
| A governance/management committee              | <input type="checkbox"/>            |
| A Constitution/governing document/set of rules | <input checked="" type="checkbox"/> |
| An Equal Opportunities Policy                  | <input type="checkbox"/>            |
| A Child Protection Policy (where necessary)    | <input type="checkbox"/>            |
| A Health and Safety Public liability           | <input type="checkbox"/>            |

## 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.*

Chester's Croft is a Residential Park Home Site for people aged 55+. We have a Residents Association and hold meetings at least twice a year.

We are a small community of 44 homes located at Chester's Croft Residential Mobile Home Park in Cheadle Hulme.

We are writing to you in our capacity of a voluntary committee for Chester's Croft Residents' Association.

Our community consists of 58 residents, mainly elderly people, with an average age of 75 (the eldest resident being the grand age of 94!). We feel that due to our ages, there is a need for a defibrillator on our Park. The last resident who required an ambulance ended up having to be taken to A&E at Stepping Hill Hospital. The ambulance arrived 10 hours later.

We are busy fundraising between ourselves to cover the cost of a defibrillator and a cabinet for this to be housed in. The best price I have been quoted is £1644 (attached).

Chester's Croft residents are, in the main, pensioners and on fixed incomes. We have been successful in raising most of the money. We have new Park Site owners, who initially granted approval for the installation of a defibrillator. They offered to meet any shortfall and also pay for the installation. Unfortunately, they have reconsidered and withdrawn their offer. This does leave us in a dilemma as we have almost reached our target but need to find the money for materials and installation costs.

Our nearest defibrillators are located at Manchester Rugby Club on Grove Lane and the Tesco store at Handforth Dean.

Acquiring a defibrillator for Chester's Croft would enable us to register with the North West Ambulance Service and become a CardiacSmart Accredited and Accredited+ Partner. This would be of benefit to all residents in the Cheadle Hulme and Bramhall/Woodford Ward Communities.

Due to the opening of the A555 Manchester Airport Link Road, we have noticed and been affected by the considerable increase in traffic and resultant noise.

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

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

Apart from the residents of Chester's Croft and Spath Lane East, people who use Manchester Rugby Club will also benefit, together with residents in the Cheadle Hulme/Bramhall and Woodford Ward Communities. As we will be registered with the North West Ambulance Service our defibrillator will be on their 'Circuit Map' for when the need arises for it to be used. Manchester Rugby Club support us in our application and made a generous donation.

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

250+

**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.*

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

£1644.00 for the defibrillator (quotation attached)  
Verbal estimate of £250.00 for the cost of materials and installation. The remaining £250.00 will be reserved for a replacement battery and pads. Once the defibrillator is used, replacement pads are required and a battery has a lifespan of between 12-24 months.

**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**

£150.00 – Donation from Manchester Rugby Club  
£250.00 – Donation from BAM Construction Ltd (my previous employers)  
£1270 raised in donations from residents of Chester's Croft and Spath Lane East

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

£500

**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?**

If we are successful in our application, all the money we require will have been met

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

Start	1 March 2022
Finish	31 March 2022

### 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 checked="" type="checkbox"/>	100+	£250
Cheadle Hulme South	<input checked="" type="checkbox"/>	150+	£250
<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 type="checkbox"/>		£
Heatons South	<input type="checkbox"/>		£
Reddish North	<input type="checkbox"/>		£
Reddish South	<input 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</b>

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



Return to:  
Democratic Services  
Town Hall, Stockport SK1 3XE

## 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: Anne Nerney

Signature: .....

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

Date: 14/02/2022