

## Conwy Business Support Grant

### APPLICATION FORM

**Please note activities which have already started are not eligible for funding i.e. items cannot be purchased or ordered until grant approval has been given in writing**

1. APPLICANT DETAILS			
Business/Company Name :			
Name of Applicant :			
Name of Partner(s)			
Business Address (at which registered for Business rates if applicable):		Home Address (at which registered for Council Tax)	
Postcode:		Postcode:	
Correspondence Address: Yes <input type="checkbox"/> No <input type="checkbox"/>		Correspondence Address: Yes <input type="checkbox"/> No <input type="checkbox"/>	
Tel. No.		Tel. No.	
Fax No.		Fax No.	
Email:		Email	
Website:			
Have you received grant money from this fund within the last 24 months?			Yes <input type="checkbox"/> No <input type="checkbox"/>
What is the name of the business advisor providing the written recommendation to support your application?			
2. PROJECT DETAILS			
What 'items' do you plan to purchase with the grant money?			

Conwy Business Support Grant - Application Form

What business objectives will this project help you to achieve? (Please tick relevant box)

- |   |   |
|---|---|
| <input type="checkbox"/> Increase profitability<br><input type="checkbox"/> Increase turnover | <input type="checkbox"/> Employ extra staff |
|---|---|

Please provide **full** details of how the project will allow you to achieve the above objective(s)

When do you plan to purchase these items

How will you find the remainder of the project costs?

**3. FINANCIAL INFORMATION**

Items to be Purchased	Supplier 1	Quote 1 £	Supplier 2	Quote 2 £

Continue on a separate sheet if necessary  
If this application is successful, the lowest quote(s) will usually be accepted

**4. BUSINESS DETAILS**

Status of Business: e.g. Limited Company/Sole Trader/Partnership/Social Enterprise/ Other	
Company Registration Number (if applicable)	
VAT Registration Number (if applicable)	
If not VAT Registered, do you intend to be in the near future?	
Business start date	
Number of hours trading per week	
Number of employees – including owner/proprietor	P/T          F/T

**5. BUSINESS ACTIVITY**

What products or services do you supply?	
--	--

Conwy Business Support Grant - Application Form

Which of the following applies to your business?	<input type="checkbox"/> Retail <input type="checkbox"/> Wholesale <input type="checkbox"/> Personal service <input type="checkbox"/> Business service <input type="checkbox"/> Manufacture <input type="checkbox"/> Other
--	---

**6. MARKET INFORMATION**

Who are your customers or potential customers?	
Who are your competitors?	
What are the unique selling points of your business?	
How do you promote your business and its products/services?	

**7. SWOT**

What are the main strengths of your business?	
What are the main weaknesses of your business?	
Are there any significant opportunities associated with your business?	
Are there any threats to your business ?	

**8. HOW DID YOU HEAR ABOUT CONWY BUSINESS SUPPORT GRANT?**

Council Website	<input type="checkbox"/>	
Word of Mouth	<input type="checkbox"/>	
Event (Please give details)	<input type="checkbox"/>	
Local Press (Please give details)	<input type="checkbox"/>	
A Business Support Organisation (Please give details)	<input type="checkbox"/>	
Other (Please give details)	<input type="checkbox"/>	

**9. DOCUMENTS TO BE INCLUDED**

- Fully completed application form
- Copies of two quotes for each item
- Most recent accounts \*
- Cash flow forecast for the next year
- Profit and loss forecast for the next year
- Recommendation from a CCBC approved Business Adviser
- Evidence of registration with HMRC

\* If the business is new there will be no previous accounts therefore we require evidence of at least 3 months trading.

**N.B. Applications will not be accepted without all the above documentation being included.**

**10. TERMS AND CONDITIONS**

Have you met all of your statutory obligations, including any which are associated with this project?

Yes  No

**11. DECLARATION/AGREEMENT**

- I declare that all the information given on the form is correct and that giving a false declaration may result in action by the CCBC against the signatory for recovery of the grant plus related costs, charges and expenses
- I understand that CCBC will conduct relevant searches to ensure that the business or the applicant are not in arrears with council tax or NNDR payments and that the grant will not be released until such arrears are cleared.
- I agree to provide CCBC with a brief progress report 12 months after the grant award (if the application as successful)
- I understand that my business details will be added to the mailing system/Business Directory (if not already on it) in order to be notified of any future grants or initiatives. I understand that my details will not be passed to any third party without my permission

**Signature**

**Print Name**

**Position in Company**

**Date**

**Please return this form to:**

**The Business Support Team  
Business and Enterprise Section  
Community Development Service  
Conwy Business Centre  
Llandudno Junction  
Conwy  
LL31 9XX**