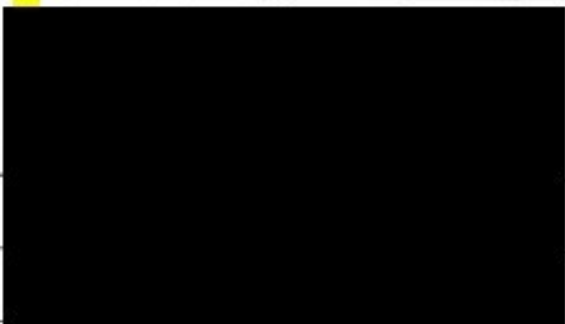


**HONINGHAM PARISH COUNCIL
GRANT APPLICATION FORM**

www.honinghampc.info

(please complete in black pen)

Name of Organisation Applying for the Grant	FIELDING COTTAGE LTD.
Charity Registration Number (If Applicable)	N/A.
Website address (if applicable)	fieldingcottage.co.uk
Main Contact of Organisation	
Name	SAM STEGGLES.
Position in Organisation	OWNER
Address	
Email	
Telephone Number	

What are the aims of your project in no more than 50 words

Installing a defibrillator at the Goat Shed within a heated cabinet on the outside of the building.

Please provide a detailed summary of the project for which funding is being sought. In preparing your summary please consider and address the following questions when submitting your application.

- What the project is all about? Is this a new project or an ongoing project?
- Who will benefit from the project? How many people do you estimate it will benefit?
- What will the benefit/s be to residents of Honingham?
- Who will be responsible for delivering the project?
- What will funding be spent on?
- If this is an ongoing project how will the project be funded once the funding from the Parish Council comes to an end?

Summary of project in no more than 200 words (please use separate page if required)

Installation of defibrillator at the Goat Shed.
 local community will benefit from use if required (Hopefully not needed!)
 Honingham residents regularly use the Goat Shed and many other local residents.
 Sam Steggs, owner of the Goat Shed will be responsible for delivering the project
 One off purchase using funds and then business to fund ongoing maintenance costs.

Total cost of project	1489.20
Amount requested from Honingham Parish Council	£1000
Source/s of other funding inc. both your organisation and external sources (if applicable)	
Name	Amount
LONDON HEARTS	300
OWN FUNDS	remainder

Total Duration of the Project	Anticipated Start Date	Anticipated Completion Date
ASAP.	ASAP	ASAP.

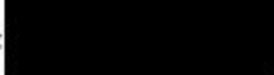
How would you prefer the grant to be paid:

BACS

Sort code:



Account Number:



Cheque

Please make cheque payable to (insert name):

I confirm that this information is correct to the best of my knowledge

Signed on behalf of the organisation:

Signed



Date 26/5/22

Print Name S STEGGS