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**Micro Business Grant Application Form**

All the information contained in this form will be treated as confidential by Mid Sussex District Council but will need to be shared with the panel who decide the grants. If your information needs to be shared with other external partners we will seek your permission before any information is shared.

Applicants should complete all sections of this form and should note that you may be contacted to confirm certain details.

**Section 1- About Your Business**

|  |  |
| --- | --- |
| **Business name** |  |
| **Contact name and position in company** |  |
| **Business address** |  |
| **Telephone** |  |
| **Email** |  |
| **Business sector** |  |
| **Organisation status (Tick one)** | New Start  |  | 1-2 Years  |  | Established |  |
| **Number of employees** | Full-time  | Part-time  | Apprentice |
|  |  |  |

**Section 2 - Eligibility**

Please indicate that you meet the eligibility criteria below by marking an X in the box. Please also provide evidence your business is properly constituted.

**Please confirm that your business is, or will be, located in Mid Sussex.**

*(You will not be able to spend the grant on activities outside Mid Sussex.)*

**Please confirm that you are able to contribute at least 50% of the project total as match funding.**

**Please confirm that only one proposal has been submitted by your business.**

**Section 3 – Your Proposal**

In no more than 1,000 words, please tell us about the project you wish assistance with/ or apprenticeship you wish to offer

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Please tell us the timescale/ timeline for your project or apprenticeship

(*Maximum 200 words*)

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Where possible, please provide us with a cost breakdown of your project. This includes quotes for equipment or services.

*Note: The Cabinet Grants Panel will look favourably on projects where funding will benefit the wider local economy. In particular, this will include where equipment or services are procured from local providers where practical.*

*If your business is VAT registered, please* ***exclude VAT*** *from your quotes provided.*

*If your business is not VAT registered, please* ***include VAT*** *in your total project cost and cost breakdown.*

Please tell us how your proposal will benefit your business, for example by helping you with wider outreach, develop and market new business lines, employ more staff or how it will help your business deliver community benefit

(*Maximum 200 words*)

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**Section 4 – Financial Information**

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| --- | --- |
| **Total Project Cost**  |  |
| **Applicant Contribution – *not applicable if the funding relates to an apprenticeship*** |  |
| **Grant Funding** |  |

Please note that the maximum grant we are able to consider is £2,000 (or £1,500 for taking on an apprentice.

If your business **is not VAT** registered please include all VAT associated with your project in your total project cost.

If your business **is VAT registered** please exclude VAT from your total project cost.

Please confirm if your business is VAT registered?

**Yes No**

**Have you been a previous recipient of the Micro Business Grant Scheme?**

**Yes No**

*If yes, please provide details on how the grant was spent.*

*Note: Applicants who were successful in their bid for last year’s scheme are welcome to apply for a grant this year; however your bid must be for a new and different project.*

**Section 5 – Certification**

I declare that the information I have given on this form is correct and complete.

I understand that if I give information that is incorrect or incomplete, you may take action against me. This may include court action.

I understand that you may use any information I have provided in connection with this and any other grant claim that I have made or may make. You may give some information to other organisations, such as government departments, local authorities and private-sector companies like banks and other organisations for the prevention or detection of fraud, if the law allows this.

**Signed:** **Date:**

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| **How did you hear about the Mid Sussex Micro Business Grant Scheme?** |
|  |

If your application is successful you will be paid via Bank Transfer. Please provide your bank details below.

|  |  |
| --- | --- |
| **Sort Code:** |  |
| **Account Number:**  |  |

**NB –** Should your application be successful, proof of purchase/employment of the apprentice will be required.

Please return by email to holly-jade.ryder@midsussex.gov.uk or by post to

**Holly-Jade Ryder**

**Mid Sussex District Council**

**Oaklands Road**

**Haywards Heath**

**RH16 1SS**