# Ward Budget

# CITY_LIVING_LOGO K&C.jpgApproval Form

## 

## Use of this form

## This form should be completed for all City Living, Local Life (CLLL) spending of allocated funds for each participating ward. This form is part of the audit trail for use of public funds. Officers will keep copies for internal records but applicants are encouraged to retain copies for their own use. Any spending approved must be for projects and activities that benefit mainly people who live or work in the ward, whose budget the spending sum is being allocated from. Further guidance about the use of this form is available from the Community Engagement Team.

## Essential information

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| **Name of individual making the request:** |  | |
| **If the request is being made by an organisation, please give name of organisation and position within organisation:** |  | |
| **Telephone, postal address and email:** |  | |
| **If this request is from a voluntary and community group (i.e. not an individual resident) please briefly outline the group's structure, purpose and history:** |  | |
| **Agreement\* by signatory\*\* to the account to which the approved spending sum will be deposited to.** | Signature | Date: |
| **Contact details:** | Daytime tel: | |
| Mobile: | |
| E-mail: | |

\*By way of this agreement you and your group are committing to utilising the spending sum according to the aims of CLLL. You must keep proper records of expenditures in relation to this application (for example by retaining receipts and invoices). You agree with the Council to allow their nominated officer(s) access to records which might be required by Internal Audit and/or the Community Engagement Team.

\*\* The person making this application can be the same person who is the signatory to the bank account of the voluntary and community group.

## Amount sought, and spending purpose

## Note: Money cannot be deposited to personal accounts. If money is to be deposited to an account for spending over a period of time then a voluntary and community organisation which agrees to accept the funds for CLLL spending purposes will have to be identified by the applicant.

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| **Spending Sum required:** | £ |
| **Name of Bank/Building Society**  **Address of Bank/Building Society**  **Name of Account:**  **Account Number:**  **Sort Code:** |  |

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| **Please state briefly the purpose and or use of the spending sum requested, i.e. what is it for, and how will the money be spent, and by ticking and then explaining how it meets specific aims of CLLL.** |
| CLLL aims are to:  1) enhance understanding of local areas (including history, geography,  demography, local assets and community resources)  2) build stronger connections and relationships within communities  (networking within and beyond ward boundaries)  3) help to identify, assess and prioritise improvements in local areas  4) devise practical solutions that engage and involve local people 5) work with local people and organisations to deliver those solutions\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**For official use only**

**Approval**

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| **Officer comments to Councillors (the Support Officer is expected to offer a view by way of an assessment of how well the application meets the CLLL aims, including advice in support or against the application):** |
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| Ward Councillor endorsement *(note: all three Ward Councillors must provide their individual approval (email approvals are accepted).* | Councillor 1Name (block caps): . . . . . . . . . . . . . . . . .Date approval received: ........................................ |
| Councillor 2Name (block caps): . . . . . . . . . . . . . . . . .Date approval received: ........................................ |
| Councillor 3Name (block caps): . . . . . . . . . . . . . . . . .Date approval received: ....................................... |

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| **It is not expected that all applications will be approved and with the requested sum. Please record here the amount approved:** |
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