

SURREY GARDENS TRUST

GRANTS SCHEME Application Form

1 Name and address of applicant (including registered charity number if appropriate) and contact name:

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2 Telephone number:.....

3 Address of application site and details of ownership if different from 1 above:

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4 Summary of project:.....

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5 Proposed - Start date:..... Completion date:

6 Total cost of project:.....

7 Proposed funding:

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8 Planning approval - required: granted:

Listed building consent - required: granted:

9 Proposals for public access:.....

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If you have any relevant plans and/or wish to amplify the above information, please attach.

Declaration to be signed by the applicant:

I agree to the terms and conditions of the Surrey Gardens Trust Grant Scheme as shown to me.

Signed:..... Date:

Please return completed form to:

Jill Leggatt, The Old Vicarage, Old Woking, Surrey GU22 9JF

For office use:

Reference: District: Application No: