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| **Application for Support In Kind** | |
| ***Please note all support in kind requests for large events, support in kind value of over £1,000, should be submitted at least 2 months prior to the event taking place to allow time for funding approval*** | |
| **Please complete all sections below** | |
| **SECTION A. CONTACT DETAILS** | |
| 1. Name of Organisation: | 2. Your name: |
| 3. Your address/ Organisation address: | 4. Your position in the organisation: |
| 5. Daytime phone number: | 6. Evening phone number: |
| 7. Mobile number: | 8. Email address: |
| ***All correspondence will be sent to the above email address unless stated otherwise*** | |
| **SECTION B. YOUR ORGANISATION** |  |
| 1. Organisation Status  a. Is it a not for profit organisation? (Please advise) **Yes/No** | |
| b. Organisation type (Please tick below) | |
| 🞏 Registered Charity  🞏 Community Association  🞏 Voluntary Organisation | 🞏 Limited Company  🞏 Other |
| 2. Please describe the purpose and activities of your organisation. | |
| **SECTION C. YOUR EVENT** | |
| 1. Name of event: | 2. Location of event: |
| 3. Start date of event:  End date of event: | 4. Start time:  End time: |
| 5. Is this event linked to any other event occurring on the same day and venue? (Please advise)  **Yes/ No**  If yes, please provide details | 6. Estimated number of participants/ spectators |
| 7. List all aims and objectives of your proposed event. | |
| 8. What activities have you planned for the event? | |
| **SECTION D. YOUR FINANCES** | |
| 1. Have you applied or do you intend to apply to other departments within Antrim and Newtownabbey Borough Council to help fund this event? (Please advise)  **Yes/No**  If yes, please provide information | |
| **SECTION E. YOUR REQUEST FOR SUPPORT – Please provide specific details and quantities** | |
| ***\*Item Size - If requesting bins please state bin size required e.g. Household bin 240L/ Commercial Bin 1100L*** | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | **Item** | **Quantity** | **\*Item Size** | **Dates required** | ***For Office Use Only*** | | ***Cost*** | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | |  |  |  |  |  | | **Disposal of waste required Yes/No** | | | |  | | **Do you require the items to be delivered? Yes/No** If yes, please provide delivery address details | | | |  | | **Delivery Address:** | | | |  | | |
| **SECTION F. DECLARATION AND CONDITIONS** | |
| The Council may agree to supply certain items of equipment on a non-return basis e.g. gloves, plastic sacks etc. However, the Council will only agree to supply other items of equipment on a loan basis. Such items will normally include waste bins, litter pickers and high visibility vests. (This list is not exhaustive and the Council reserve the right to amend it without notice). **Due to the associated inherent risks and the conditions that these items will be used in, Antrim and Newtownabbey Borough Council will not be held liable for any liability whatsoever and howsoever caused as a result of their use.**  The Applicant named in Section A of this application confirms that they accept personal responsibility on behalf of the organisation named in Section A for ensuring the safe keeping and safe return of any equipment supplied on a loan basis.  The Applicant named in Section A of this application will be the sole contact held liable on behalf of the organisation named in Section A for any loss or damage caused to any equipment provided on a loan basis. ***Any costs incurred by the Council in replacing or repairing any equipment lost or damaged whilst on loan shall be borne by the person named in Section A.***  Applications which have not answered all the questions in full will not proceed further.  **Please email your Support in Kind Application to:** waste@antrimandnewtownabbey.gov.uk  Privacy Notice – Support In Kind  We are collecting information from you for the purposes of *processing your application for Support in Kind*. This is in accordance with *Section 6(1)(b) of the GDPR legislation as processing is necessary for the performance of a contact with you or to take steps to enter into a contact.* Information will not be transferred to countries outside the EEA. All information collected and processed may be subject to audit. The Council may also process the information for research purposes carried out in the public interest. All information will be held in accordance with the Council’s retention and disposal schedule (see <http://www.antrimandnewtownabbey.gov.uk/Council>) and will be disposed of securely when no longer required. You have a number of rights with regard to data we hold on you – for further information see the Information Commissioner’s website <https://ico.org.uk/for-organisations/guide-to-the-general-data-protection-regulation-gdpr/individual-rights/>  If at any point you believe the information we process on you is incorrect you can request to see this information and have it corrected or deleted. If you wish to raise a complaint on how we have handled your personal data, you can contact our Data Protection Officer who will investigate the matter:  Data Protection Officer  Antrim Civic Centre, 50 Stiles Way, Antrim, BT41 2UB  T: 028 94 463113  E: DPO@antrimandnewtownabbey.gov.uk  If you are not satisfied with our response, or believe we are not processing your personal data in accordance with the law, you can complain to the Information Commissioner’s Office (ICO). | |
| **Declaration**  By signing this application form I agree to the conditions as detailed in the conditions section above. | |
| Sign Name: | Date: |
| **Please forward any queries to: waste@antrimandnewtownabbey.gov.uk** | |

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| FOR OFFICE USE ONLY | |
| 1. Received date: | 2. Application acknowledged: |
| 3. Conflict of interest declaration:  🞏 I **do not have** an actual or perceived conflict of interest that will prevent me from participating in the Support in Kind application process.  🞏 I **do have** an actual or perceived conflict of interest that will prevent me from participating in the Support in Kind application process.  **I confirm that I have provided details of this conflict to my line manager and that I will not participate in this process.**  Signed: . Dated: . | |
| 4. Assessors recommendations:  Value of support requested: £ Value of support offered: £  Budget available? Yes/ No | |
| 5. Head of Service Approval? Yes / No (Less than £1000)  Please comment:  Sign: Date: | |
| 6. Approved By Committee? Yes/ No (More than £1000)  Date:  Any Comments: | |
| 7. Ratified by Council? Yes/ No  Date:  Any Comments: | |