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REVISED MAY 2011

Application Form

PLEASE READ THE ACCOMPANYING GUIDANCE NOTES IN FULL BEFORE COMPLETING THIS FORM.

Please send completed application forms and relevant documentation to:
Listed Places of Worship Grant Scheme, PO Box 609, Newport, South Wales NP10 8QD.

Please quote this reference number on all future correspondence.

Claim Reference (for office use only) _____

In order to prevent delays when processing your application, please ensure that all sections are completed. If you have any queries or doubts regarding eligibility of works, or require assistance in completing the form, please contact one of our operators prior to sending in the form, on 0845 601 5945. This will be charged as a local call.

THIS APPLICATION MUST BE COMPLETED IN CAPITALS THROUGHOUT

Section 1: Contact Details

1. Name/dedication of listed place of worship:

2. Address of the listed place of worship:

Address: _____

Town/City: _____

County (compulsory): _____

3. Name of local authority in whose area the place of worship is located:

4. Religion or denomination of the place of worship:

5. Name of person/organisation with legal responsibility for the works to the place or worship:

6. Details of countersignatory (See Guidance Notes Step 4).

Please note that this person must countersign the application form.

Title: Mr/Mrs/Miss/Other (please specify) _____

Name: _____

Responsible position:

Address: _____

Town/City: _____

Postcode: _____

Daytime Telephone including STD code:

() _____

Fax including STD code:

() _____

Email: _____





7. Are the details provided in question 6 those we should use in any correspondence concerning your application?

Yes No

If no, please give your correspondence details below:

Title: Mr/Mrs/Miss/Other (please specify) _____

Name: _____

Responsible position: _____

Address: _____

Town/City: _____

Postcode: _____

Daytime Telephone including STD code:

() _____

Fax including STD code:

() _____

Email: _____

Should we need to contact you, we will try twice by phone/email. If unsuccessful, we will return your application for further completion.

Please note that we will not correspond with a third party.

Section 2: Step 1 – The Place of Worship

8. Is the place of worship solely or mainly used as a public place of worship?

Yes No

9. Are public religious services held in the place of worship at least six times a year?

Yes No

10. If No, is it:

A monastery? Yes No

A nunnery? Yes No

A similar religious establishment? – please give brief details: Yes No

Owned by or vested in:

The Churches Conservation Trust

Yes No

Friends of Friendless Churches

Yes No

Historic Chapels Trust

Yes No

Scottish Redundant Churches Trust

Yes No

Welsh Religious Buildings Trust

Yes No

11. Please indicate if your organisation or the organisation with legal responsibility for the works to the place of worship:

Has charitable status, or is recognised as a charity by HMRC or the Inland Revenue in Scotland or Northern Ireland:

Yes No

Is covered by a Parochial Church Council:

Yes No

If you cannot answer Yes to any of the above, please attach a copy of your constitution.





Section 3: Step 2 – Listed Building

12. Please indicate the organisation that has listed your place of worship (See Annex A):

- Department for Culture Media and Sport or predecessor bodies (English Heritage)
- Historic Scotland
- Cadw
- Northern Ireland Environment Agency

13. Listed Grade/Category (if known):

Section 4: Step 3 – Eligible Expenditure

14. When were the works for which you are applying for grant carried out?

Start date: / / 20

End date: / / 20

Ongoing: _____

15. Please give a brief description of the work. Please see the guidance notes to check on eligibility.

16. Has the organisation with legal responsibility for the works agreed a reduced effective rate for VAT? (See guidance note 3.2)

Yes No

If No, please go to Question 20.

17. If Yes, please give the VAT registration number:

18. What effective net rate of VAT do you pay?

19. Has this been agreed with HM Revenue and Customs?

Yes No

If Yes, please provide evidence of this agreement with your application, showing clearly the agreed rate applicable to the works.

20. Have you been awarded a grant to cover any elements of the works to which this application relates to by:

- English Heritage
- Historic Scotland
- Cadw
- Northern Ireland Environment Agency
- Heritage Lottery Fund
- Other (please specify):
- _____

If you tick any of these boxes, this information will be passed to the relevant grant awarding agency. In completing this application, you are giving an undertaking that the place of worship will reimburse the relevant amount of grant received via this scheme to the grant awarding agency, if the grant given by that agency already covers the VAT which you are now seeking to reclaim.

Section 5: Your claim

21. Have previous claims been made for this building under the Listed Places of Worship Grant Scheme?

Yes No

22. How many original VAT invoices are attached?





23. Please complete the following for each invoice. Section 5 of the Guidance Notes gives an example of how to complete this part of the form. If you are enclosing more than 5 invoices, please attach an additional sheet and tick here.

Invoice Ref.	Net Amount	VAT Rate (e.g. 17.5%)	% Eligible Works Reclaimable	Total Amount of Grant claimed for this Invoice
	£	%	%	£
	£	%	%	£
	£	%	%	£
	£	%	%	£
	£	%	%	£

Total from additional sheet:

£

24. Total amount of grant claimed:

£

Section 6: Your Payment Details

25. Bank Account Name:

26. Bank Name _____

27. Bank Sort Code: - -

28. Bank/Building Society Account Number:

29. Building Society Account Name:

30. Building Society Name: _____

31. Building Society Sort Code

- -

32. Building Society Roll Number: _____

33. Do these details relate to a bank/building society account authorised for official expenditure in connection with the listed place of worship to which the application relates?

Yes No

Section 7: Declaration

We certify that this application form has been completed in accordance with the regulations set out in the Guidance to the Listed Places of Worship Grant Scheme and that we have carried out the appropriate checks and found all the above information to be correct.

We agree that, where relevant, the information provided can be shared with English Heritage, Historic Scotland, Cadw, The Northern Ireland Environment Agency, Heritage Lottery Fund and other relevant Lottery distributors.

Signature: _____

Name: _____

Post held: _____

Date: / / 20

Countersignature _____

Name: _____

Post held: _____

Date: / / 20

Footnote

The information provided will be held on computer and will be used to process applications, grants and to produce statistics. Some of this information may be shared with other grant-providing organisations such as English Heritage, the Heritage Lottery Fund, and devolved administration heritage agencies; Cadw, Historic Scotland and Northern Ireland Environment Agency.

In order to prevent delays when processing application forms, please ensure the following are included with the claim:

- A copy of your organisation's constitution if you answered No to question 11.
- For invoices that cover work:
 - for a qualifying building and partly for a non-qualifying building or;
 - partly for a qualifying maintenance or repair and partly for a non-qualifying maintenance or repair
 the invoice must be marked to show what percentage is being claimed for the eligible works, where the invoice does not make this clear.
- The form is signed and countersigned.

Please send completed application forms with supporting documentation to the following address:
Listed Places of Worship Grant Scheme, PO Box 609, Newport, South Wales NP10 8QD.

