

(GREAVES TENANTS HALL) EXPRESSION of INTEREST

PART A – APPLICANT DETAILS

Please provide the following details about your organisation

Full name of applicant
organisation.....

Address:

Postcode..... Website:

If this application is from a consortium, please list all other organisations in the consortium:

.....
.....

Details of person to contact about this application:

First name:

Surname:

Position in organisation:

Telephone number: Mobile number:

Fax number: E-mail address:

What is the legal status of your organisation?

Please tick all that are applicable

- | | | |
|---|------------------------------------------------|--------------------------|
| ❖ | Unincorporated body | <input type="checkbox"/> |
| ❖ | Trust | <input type="checkbox"/> |
| ❖ | Faith group engaged in voluntary/social action | <input type="checkbox"/> |
| ❖ | Community Interest Company | <input type="checkbox"/> |
| ❖ | Social enterprise | <input type="checkbox"/> |
| ❖ | Charitable Incorporated Organisation | <input type="checkbox"/> |
| ❖ | Company limited by guarantee | <input type="checkbox"/> |
| ❖ | Registered charity | <input type="checkbox"/> |
| ❖ | Registered friendly society | <input type="checkbox"/> |
| ❖ | Registered social landlord | <input type="checkbox"/> |
| ❖ | Other (please describe below) | <input type="checkbox"/> |

.....

Company registration number:

Charity registration number:

Friendly Society registration number:

Details of Trustees (if appropriate):

.....

Please provide brief details of the staffing associated with your organisation (including any volunteers, part time workers, board members etc.)

Financial Information

Please provide financial statements for the organisation over the last three full years (profit and loss, balance sheet etc).

N.B. Please note that if the financial information is not provided then this application will not progress any further.

PART B: WHAT IS IT YOU WANT TO DO?

If your organisation was successful in securing the tenancy for Greaves Tenants Hall, please provide us with details of what activities / services you will be delivering from the site.

A large, empty rectangular box with a thin black border, intended for the user to provide details of activities and services to be delivered from the site.

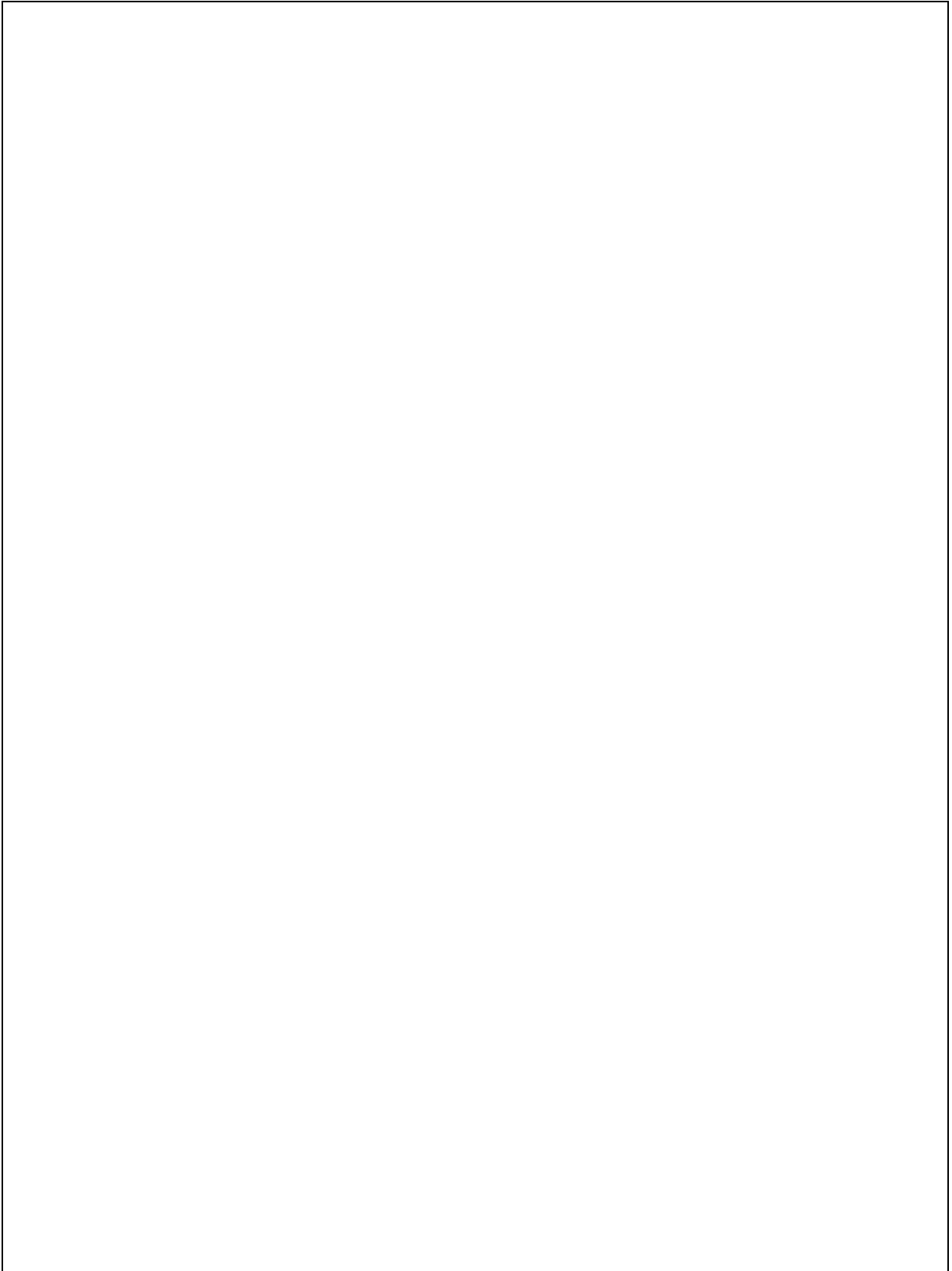
Your application will be considered against on the following:

- We will improve early intervention and prevention work to secure healthy lifestyles and behaviours.
- We will enhance our status as a city of culture, sports and events.
- We will encourage citizens of all abilities and ages to engage in physical activity and improve their health and wellbeing.
- We will deliver high quality housing, sporting facilities and transport infrastructure for the benefit of our citizens.

Taking into account the above, please explain why you believe there is a need for this activity / service on this site and any benefits / impacts it will have in the area.

How will you fund your proposal?

Applicants should take into consideration the rent required for this site, as outlined in the marketing details.



PART C – EXPERIENCE

What experience does your organisation have of running facilities of a similar nature? e.g. what would a typical day / week look like for your organisation, including specific days and times the site will be in use.

Details to include systems for site bookings, open and closing the site, site maintenance and security.

PART D – FUTURE DEVELOPMENTS

The agreement for the site is for 3 years (less 1 day) or a 5 year lease. Please note that the Lease will be contracted outside the security provisions of the Landlord & Tenant Act 1954 part II sub-sections 24 – 28 which means you will have no legal right to remain in the site at the end of the term. Please provide brief details of your organisations priorities and plans for the site initially for the first 6 months and then the medium to long term.

N.B. Full details in the form of your Business Plan should be submitted as part of your application.

PART E – DECLARATION

This must be signed by the appropriate authorised officer in your organisation (or on behalf of the consortium). This means either the Chair of your management committee, your Managing Director or Chief Executive or, if relevant, your company secretary.

I confirm that:

- ❖ the information contained within this application is correct and complete
- ❖ the required supporting documents referred to in this application can be made available if requested

Name:

Signature: Date:

Position in organisation:

E-mail: Telephone: