Newton Abbot Town Council

Shop Improvement Scheme

Application Form

**Details**

|  |  |
| --- | --- |
| Contact name: |  |
| Contact address: |  |
| Name of business: |  |
| Business address:If different from above: |  |
| Telephone number: |  |
| Email address: |  |
| Website: |  |
| Type of business: |  |
| Address of premises for which the grant has been requestedIf different from above:  |  |

Is your business VAT registered? **€** Yes **€** No

Your interest in the property:

**€** Owner

**€** Tenant

**€** Other (please specify)

If you are a tenant, please give number of years left on lease:

Have you made any previous applications for grants for improvements to the premises? If yes, please give details.

Important information - Under European “State Aid” rules your business should not obtain more than a total of 100,000 euros (approximately £65,000) from other Government Departments of local authorities over a 3-year period.

I have read the above and confirm that we have not received any recent state aid, as above

**€** (Please tick)

**Statement of works**

Please describe the changes that you propose to make including:

• Reference to whether doors, windows or entrances are to change

• The nature of changes to frontage facade including details of features you wish to add or remove

• Changes to retail display units

• Details of colours and styles to be employed

|  |  |
| --- | --- |
| Description of work | Estimated costs |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
|  |  |
| TOTAL |  |

Are the costs (please tick):

• Estimated **€**

• Based on quote **€**

What is your expected start date for the work?

When do you expect the work to be completed?

Do you require any of the following permissions? (Please tick relevant box):

|  |  |  |
| --- | --- | --- |
|  | Yes | No |
| Planning Permission  |  |  |
| Building control approval  |  |  |
| Listed building consent  |  |  |
| Advertising consent  |  |  |

A short statement as to how you consider your project will provide improvements to the Newton Abbot offer and why the grant is needed:

……………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………………...

[continue on separate sheet if necessary]

|  |
| --- |
| **Declaration** I / We hereby declare that I have read the terms and conditions and declare that the information given within this application form and any supporting material is correct to the best of my / our knowledge. I authorise Newton Abbot Town Council to make any enquiries it considers necessary for the assessment of the application. Signature: Position: Date:  |

Please check that you have enclosed the following before sending:

* + Copy of tenancy (if a tenant)
	+ Photographs showing the current front and side elevations of your shop/business front
	+ Visuals on proposed alterations (if available)
	+ Copy of permissions
	+ VAT declaration

N.B. Teignbridge District Council Shop Fronts Planning Advice Note Click here: -

<http://www.teignbridge.gov.uk/CHttpHandler.ashx?id=17670&p=0>

NOTES: (not to be included with the application details)

Membership of the Grant Panel will be as appointed by Newton Abbot Town Council. Successful applicants are required to provide feedback as to the outcomes of the receipt of a grant and to provide images showing the property both before work started and after completion of the works.