

**Application for Grant Funding – Affordable Housing**

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| **IMPORTANT****Please read guidance note before completing this form** |

**Part 1**

**APPLICANT**

**Organisation Name**

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| --- |
|  |

**Registered Address**

|  |
| --- |
|  |

**RSH Registration Number (if applicable)**

|  |
| --- |
|  |

**Contact Name**

|  |
| --- |
|  |

**Telephone**

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| --- |
|  |

Email

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|   |

**PART 2**

**PROJECT DETAILS**

**Scheme Name**

|  |
| --- |
|  |

**Scheme Address**

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| --- |
|  |

**Planning Reference**

|  |
| --- |
|  |

**Brief description of proposal (max 200 words)**

|  |
| --- |
|  |

**Breakdown of proposed tenure and unit types**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **AFFORDABLE RENT** | **Number** | **Weekly Rent Payable** | **Equivalent Weekly Market Rent** | **Weekly Rent as % of Market Rent** |
| 1 bed |  |  |  |  |
| 2 bed |  |  |  |  |
| 3 bed |  |  |  |  |
| 4 bed |  |  |  |  |
| Other (specify) |  |  |  |  |
|  |  |  |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **SOCIAL RENT** | **Number** | **Weekly Rent Payable** | **Equivalent Weekly Market Rent** | **Weekly Rent as % of Market Rent** |
| 1 bed |  |  |  |  |
| 2 bed |  |  |  |  |
| 3 bed |  |  |  |  |
| 4 bed |  |  |  |  |
| Other (specify) |  |  |  |  |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Low Cost Home Ownership** | **Number** | **Market Value** | **Initial Equity Share (%)** | **Sale price (should reflect Initial Equity Share %)** | **Rent payable on unsold equity (should not exceed 2.5%)** |
| 1 bed |  |  |  |  |  |
| 2 bed |  |  |  |  |  |
| 3 bed |  |  |  |  |  |
| 4 bed |  |  |  |  |  |
| Other (specify) |  |  |  |  |  |

**General Needs**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

**Supported**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

**Other (please specify)**

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| --- |
|  |

**Will the project employ Modern Methods of Construction (MMC)? If Yes, please specify**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

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|  |

**Will the project be Low, Zero or Negative carbon? If Yes, please specify (max 200 words)**

|  |  |  |  |
| --- | --- | --- | --- |
| Yes |  | No |  |

|  |
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|  |

**Please detail any further measures which will contribute to reducing the project’s carbon footprint (max 200 words)**

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|  |

**Part 3**

**Scheme Costs and Funding**

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| --- | --- |
| **Acquisition** |  |
| **Works (purchase cost if ‘off the shelf’)** |  |
| **On-costs** |  |
| **Total Scheme Costs (TSC)** |  |

|  |  |
| --- | --- |
| **Loan** |  |
| **RCGF** |  |
| **Other Public Subsidy (OPS) or Grants (specify below)** |  |
| **Initial sales income (LCHO only)** |  |
| **GRANT (requested in this application)** |  |
| **Total (should equal TSC)** |  |

**OPS / Grants**

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| --- |
|  |

**Part 4**

**Grant Requested**

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| --- | --- | --- |
|  | **Number of Units** | **Grant** |
| **Social Rent** |  |  |
| **Affordable Rent** |  |  |
| **Low Cost Home Ownership** |  |  |
| **TOTAL** |  |  |

**Forecast Start on Site (M/Y)**

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| --- |
|  |

**Forecast Completion (M/Y)**

|  |
| --- |
|  |

**Part 5**

**Required Documentation to be submitted with this application**

1. Financial Appraisal
2. Layout and Location Plan
3. Supporting statement

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Signed** |  | **Name** |  | **Position** |  |

|  |  |
| --- | --- |
| **Date** |  |

**PLEASE RETURN TO** **affordablehousingteam@southandvale.gov.uk** **no later than 18:00 on 30 September 2022**