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AI-generated content may be incorrect.**

**Rural England Prosperity Fund – Business Grant Application**

Please read the business grant criteria and website information, ensuring your project is located in eligible rural area of **Braintree District** prior to completing the application. Please complete all sections fully and provide supporting evidence as failure to do so may result in your application being rejected or delayed.

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| **Part 1** - **About your Business** | | | | | | | |
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| **1.1 Business details** | | | | | | | |
| Business Name |  | | | | | | |
| Contact name and position |  | | | | | | |
| Address  (Must be based in an eligible rural area of Braintree District) |  | | | | | Postcode | |
|  | |
| Contact Email |  | | | Contact Telephone | |  | |
| Legal Status of Organisation *(e.g. sole trader, Ltd Co)* |  | | | Company No. (if applicable) | | Business start date | |
|  | |  | |
| Website | |  | | | | | |
| Do you have an active business bank account? *(no payment will be made into personal accounts)* | | Yes | | | No | | |
| Please confirm size of the business | | Micro  Micro business:Your company will be a micro-business if it has any 2 of the following:   * a turnover of £1 million or less * £500,000 or less on its balance sheet * 10 employees or less | | | * Small   Small Business: Your company will be ‘small’ if it has any 2 of the following:   * a turnover of £15 million or less * £7.5 million or less on its balance sheet * 50 employees or less | | |
| Is your company linked to any other business *(part of a Group/franchise)* | | Yes | | | No | | |
| If yes, please provide details? | |  | | | | | |
| Where did you hear about the grant? | |  | | | | | |
| Please provide a summary of your business activities. | | | | | | | |
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| 1. Is your business the subject of any ongoing investigation relating to suspicion of fraud or irregularity under an existing contract | | | | | | Yes | No |
| 1. Is your organisation/business in a state of insolvency, voluntary administration, compulsory winding up and receivership, composition with creditors, company voluntary arrangements or subject to equivalent proceedings? | | | | | | Yes | No |
| 1. Does your organisation/business have up to date policies and procedures relating to Health and Safety, Safeguarding, Equality and Diversity and Data Protection including GDPR? | | | | | | Yes | No |
| 1. Does your organisation/business have in place both employers and public liability insurance as legally required? | | | | | | Yes | No |
| 1. Has your organisation received or is it expecting to receive funding for the project under other Defra schemes including:  * The Farming in Protected Landscapes Programme * The Farming Investment Fund * The Platinum Jubilee Village Hall Improvement Grant Fund | | | | | | Yes | No |
| 1. Has your organisation received or is expecting to receive funding for this or any other project in the last three years? | | | | | | Yes | No |
| If you have selected *Yes* for(i) (ii), (v) or (vi) *No* for (iii) or (iv) above, please provide further relevant information or an explanation as to why this is not available. | | | | | | | |
|  | | | | | | | |
| Are you commercially, financially, legally, professionally, or personally linked to Braintree District Council or its Councilor’s or Officers? | | | | | | | |
| Yes | | | No | | | | |
| If you have selected yes, please give further details: | | | | | | | |
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| **1.2 Track record** |
| Please provide details of any similar projects that you have successfully delivered in the past. |
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| Does your business have the capacity, resources, and capability to deliver the proposed project? Please provide details: |
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| **Part 2 - About your Project** |

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| **2.1 Overview** |
| Please tell us the name of your project. |
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| **2.2 Brief Summary of Your Project** (max 500 words) |
| Please provide a description of the project for which funding is being sought, including why it is required, what it aims to achieve and how the project will benefit your business? Please see 2.4 as reference to the intervention it aligns with. |
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| **2.3 Tell us about the need for REPF for your project** |
| Would you be able to run your proposed project without REPF? Would it be necessary to run your project at a smaller scale without REPF? |
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| **2.4 Meeting the Priorities and Interventions of the REPF** | | | |
| Please tell us which priority and intervention your project will deliver against. For examples of projects see Appendix 1) | | | |
| **Fund** | **Priorities** | **Interventions** | |
| **REPF** | **Supporting Rural Businesses** | Funding (capital grants) for small scale investment in micro and small enterprises in rural areas. |  |
| Funding (capital grants) for the development and promotion of visitor economy |  |
| Explain how your project aligns with the intervention? | | | |
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| How does your project demonstrate value for money? | | | |
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| How does the project demonstrate additionality? (The extent to which something happens as a result of an intervention that would not have occurred in the absence of the intervention) | | | |
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| For carbon reduction projects (solar panels/LED lights) please give information on the energy costs savings because of the project. | | | |
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| What is the projects impact on the environment? How will any impact be mitigated? | | | |
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| What are the project’s impacts on natural assets and nature? | | | |
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| **2.5 About the location of the project** |
| Where will your project be delivered? Please provide post code or map of location. Have you checked this is in an eligible rural area in Braintree (see criteria and website on how to check). |
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| Does the project need planning permission? If planning permission is required, please provide further details. |
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| Please indicate what legal rights you have to the property to which your project applies. | | | |
| Freehold | Leasehold | | N/A |
| If Leasehold, what is the unexpired term of the lease? | | | |
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| Does your project involve work on land or a building, including refurbishment? | | | |
| Yes | | No | |
| If leasehold, do you need to obtain the consent of the freeholder/estate owner to make alterations to the property? | | | |
| Yes | | No | |
| If yes, please provide written confirmation that alterations are allowable: | | | |
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| Please outline details and dates of any planning or statutory consents applied for, or granted, in relation to this project. | | | |
| Type of planning or statutory consent | Date applied for | | Date granted |
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| Any comments: | | | |
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| Does the project involve the acquisition of any land? If acquisition is required, please provide further details. |
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| Does the organisation own the land on which the project will be based or has permission been sought from the landowner? |
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| Does the organisation hold a lease on the land on which the project will be based with at least 3 years of the lease remaining? Please provide evidence of lease and permission from landowner. |
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| **2.6 Outputs and Outcomes** |
| How does your project demonstrate value for money? |
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| How does the project demonstrate additionality? (The extent to which something happens as a result of an intervention that would not have occurred in the absence of the intervention) |
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| What are the expected outputs of the project and how will they be measured?  Please include details of your baseline assessment (please complete Appendix 2) |
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| What are the expected outcomes of the project and how will they be measured?  Please include details of your baseline assessment (please complete Appendix 2). |
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| * 1. **Delivery** |
| Please outline your expected timescales for delivering your project. Include any key milestones or deadlines you need to meet if they are known. We are unable to fund any items that have been purchased prior to issue of a Grant Funding Agreement.  Maxwell |

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| Project Timescale: |  | | |
| Start Date: |  | End Date: |  |

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| Further information: |

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| **2.8 Costs and Funding** | | | | | | | |
| Please indicate the total amount of funding you are requesting for your project | | | | | | | |
| **Cost of the Project** | | | | | | | |
| Please indicate the total cost of your project. | | | | £ | | | |
| **REPF Funding Requested (capital only)** | | | | **2025/26** | | | |
| Please indicate the % of REPF requested (max 50% of eligible project costs) | | | | % | | | |
| **Total Grant Requested:** | | | | £ | | | |
| **Project funding** | | | | | | | |
| Please indicate how you intend to fund the balance of the project outlined above. Provide details of where this funding will come from and whether sums have been confirmed. | | | | | | | |
| Total amount of funding secured | | | | £ | | | |
| *[Optional – only complete for funding stream you have identified]* | | | | **Amount applied for** | | **Confirmed** | |
| Own Funding | | | | £ | | Y/N | |
| Others (please name) | | | | £ | | Y/N | |
| Others (please name) | | | | £ | | Y/N | |
| Please note: the funding requested, and the funding secured should equal the total project costs. This should include all costs associated with completion of the project not just the 50% match funding. | | | | | | | |
| **2.9 Quotations** | | | | | | | |
| Your application must be accompanied by at least one quote for each item up to £2499. You must provide three quotes for each aspect of the works or goods costing £2,500 or more.  Please give details of your quotations below: | | | | | | | |
| Please give details of your quotations below: | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
| Item 1 name: |  |  | | |  | |  |
| Quote reference | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
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| Please tell us how you have selected your preferred supplier from the quotes that you have obtained? | | | | | | | |
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| Please give details of your quotations below: | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
| Item 2 name: |  |  | | |  | |  |
| Quote reference | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
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| Please tell us how you have selected your preferred supplier from the quotes that you have obtained? | | | | | | | |
|  | | | | | | | |
| Please give details of your quotations below: | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
| Item 3 name: |  |  | | |  | |  |
| Quote reference | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
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| Please tell us how you have selected your preferred supplier from the quotes that you have obtained? | | | | | | | |
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| Please give details of your quotations below: | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
| Item 4 name: |  |  | | |  | |  |
| Quote reference | Supplier name | Cost (exc. VAT) | | | VAT amount | | Preferred supplier |
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| Please tell us how you have selected your preferred supplier from the quotes that you have obtained? | | | | | | | |
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| **Please continue on a separate sheet if necessary and include with your application**. | | | | | | | |
| Is your organisation VAT registered? | | | | | | | |
| Yes (Please provide VAT Number below) | | | No | | | | |
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| Is your organisation able to reclaim VAT? | | | | | | | |
| Yes | | | No | | | | |

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| **Please enclose a copy of your latest set of accounts, together with your budget for the current year.** |

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| **Part 3 – Declarations** |

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| **3.1 Disclaimers** | | |
| **Data Protection** | | |
| Please note that by submitting this application form, you are consenting to any Personal Data collected being processed by Braintree District Council and shared with partners involved in the delivery of UKSPF and REPF. This includes the Ministry of Housing, Communities and Local Government and its contractors. The Personal Data will be held for the purposes of contacting applicants and assessing applications. | | |
| **UK Subsidy Control Regulation** | | |
| Please note that as a Public Authority, Braintree District Council must comply with the new UK Subsidy Control regime. By proceeding, you are agreeing to provide the necessary details of your project to enable the Council to meet the transparency obligations that apply to public authorities awarding subsidies.  Please also note that according to Minimal Financial Assistance regulation, standalone subsidies up to the value of £315,000 are exempt from having to meet the subsidy control requirements. However, if an individual organisation’s total subsidy receipts exceed £315,000 over a period of three financial years, the exemption no longer applies, and the relevant subsidies must be assessed against the subsidy control principles. Recipient organisations must inform the Council if this £315,000 threshold is due to be exceeded. Further information is available here, [via the Government website.](https://www.gov.uk/government/collections/subsidy-control-regime) | | |
| **3.2 Approval by the Applicant** | | |
| Please check that all sections of the form are complete and provide your name and date below to confirm that the information provided in this form is correct. Confirm that you have the authority to submit this form on the behalf of the organisation in question. Please also confirm you have read the guidance on the District Council website and appendices. | | |
| **Fraud Statement:** | | |
| i. I have read and understood all documents about this scheme, including all  information about eligibility.  ii. I am providing true, accurate and complete information  iii. I understand that by giving wrong or incomplete information which I know to be  misleading, I may be committing a criminal offence and could face prosecution  iv. I understand Braintree District Council will investigate all applications where it  suspects fraud  v. I understand that Braintree District Council will check all the information that I provide  and may ask for further details, if necessary  vi. I understand that I must pay back any money I receive to which I am not entitled | | |
| **I certify that:** | | |
| 1. I have read, understood and agree to be bound by the conditions of this grant scheme as detailed in the criteria or other supporting documentation | | |
| 1. I understand and agree that if this application is successful, the organisation or individual will be bound to use the grant exclusively for the purpose specified in the application | | |
| 1. The information contained in this grant application is true and accurate and complete in all respects, and that the budget for the project represents a reasonable estimate of cost for the proposed undertaking and is good value for money. | | |
| 1. I can confirm that I am the sole owner of the business, or that I am one of the business owners and I have due authority to submit this application on behalf of my organisation. | | |
| **I understand that:** | | |
| 1. The acceptance of this application by Braintree District Council does not in any way signify that they have agreed the project is eligible or that I will receive funding | | |
| 1. The full application may be declined, and that the decision of Braintree District Council is final and that there is no appeal process. | | |
| 1. Any grant paid will become immediately repayable in the event of any material inaccuracy or submission of false information. | | |
| **Please confirm you have read, understood and agree to the terms of the declaration by signing below. Please sign using your hand signature, using ink. The declaration page should be scanned or photographed and sent electronically with your application.** | | |
| **5.2 Declaration by the Applicant** | | |
| Please check that all sections of the form are complete and provide your name and date below to confirm that the information provided in this form is correct. Please confirm that you have the authority to submit this form on the behalf of the organisation in question. | | |
| Signature: | | |
| Name: | Name of Business: | |
| Position: | Date: | |
| **3.3 Supporting Documents** | | |
| Please provide the following information to support your application if applicable | | Tick |
| Planning permission | |  |
| Lease/landlord agreement | |  |
| Proof of match funding/project funding | |  |
| Any other licences or consents required for the project | |  |
| Quotes for items requested | | : |
| Evidence of market research/project need | |  |
| Most recent set of accounts | |  |
| Outputs (please see Appendix 2) | |  |
| Other (please specify) | |  |

**Please return your completed form via email to** [**repfenquiries@braintree.gov.uk**](mailto:repfenquiries@braintree.gov.uk)

**Appendix 1 -Example projects**

**Funding (capital grants) for small scale investment in micro and small enterprises in rural areas.**

For example: - purchasing new process and packaging machinery such as brewing equipment and onsite vending machines - equipping development kitchens or modernising existing kitchen equipment for increased energy efficiency or increased productivity through automation. Energy efficiency measure – Solar Panels.

**Funding (capital grants) for the development and promotion of visitor economy**

For example: - creating event venues or farm tourism facilities such as accommodation, wedding venues and leisure facilities - provision of facilities for pet and equines such as kennels, livery and pet health venues.

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| **Appendix 2** |  |  |  |
| Please complete the following realistically. |  |  |  |
| Outputs & Outcomes | Present | After REPF funding | Please give some additional information to explain the change |
|  |  |  |  |
| No of events held |  |  |  |
| No of visitors |  |  |  |
| No of businesses supported |  |  |  |
| m2 of increased commercial space |  |  |  |
| m2 of improved commercial space |  |  |  |
| no of trees planted |  |  |  |
| Increase in income |  |  |  |
| carbon reduction initiatives in place |  |  |  |
| Energy bills costs |  |  |  |
| Jobs safeguarded |  |  |  |
| No of Farm Businesses supported |  |  |  |
| No of new businesses created |  |  |  |
| No of Farm diversification projects supported |  |  |  |
| No of microbusinesses |  |  |  |
| No of businesses experiencing growth |  |  |  |
| Jobs safeguarded as a result of support |  |  |  |
| No of businesses adopting new to the firm technologies or processes |  |  |  |
| No of enterprises with improved productivity |  |  |  |
|  |  |  |  |